

AZIENDA SANITARIA LOCALE NAPOLI 1 CENTRO

Dipartimento di Salute Mentale

STRUTTURA CENTRALE PSICOPATOLOGIA DA MOBBING E DISADATTAMENTO LAVORATIVO

Centro di Riferimento Regione Campania

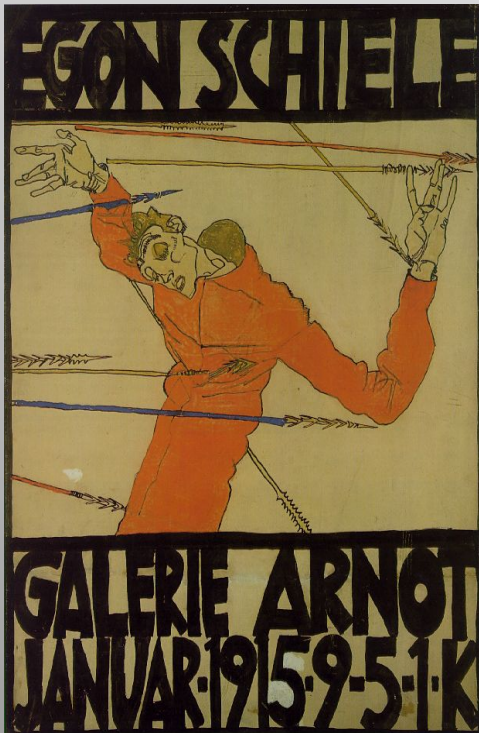
(Responsabile: G.Nolfe)

**CONVEGNO NAZIONALE
STRESS, MOLESTIE LAVORATIVE E
ORGANIZZAZIONE DEL LAVORO: ASPETTI
PREVENTIVI, CLINICI E NORMATIVO-
GIURIDICI. LE SOLUZIONI POSSIBILI**

Policlinico - Clinica Mangiagalli

(Milano 7 Giugno 2016)

**Quindici anni di
Psicopatologia del Lavoro:
l'esperienza del centro
napoletano
(Giovanni Nolfe)**



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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: dott. Giovanni Nolfè)

Psicopatologia del Lavoro



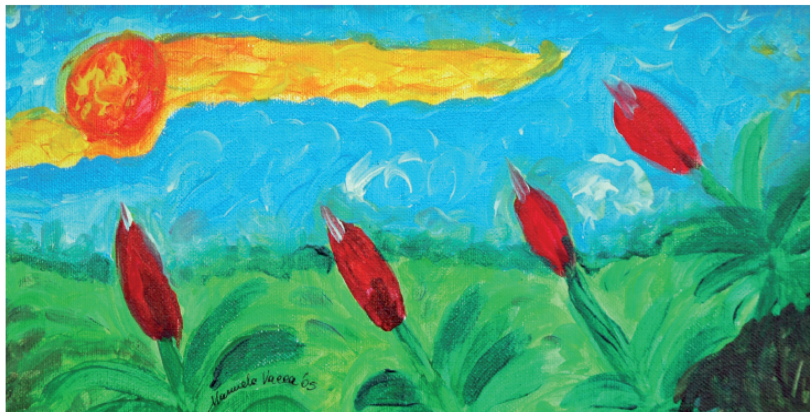
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(Responsabile: Giovanni Nolfè)

ISTITUTO ITALIANO PER GLI STUDI FILOSOFICI

PSICOPATOLOGIA DEL LAVORO
LE DIMENSIONI CLINICHE, PSICOLOGICHE E SOCIALI

*Atti del Convegno
Napoli, 4-5 dicembre 2009*

A cura di
GIOVANNI NOLFE e CLAUDIO PETRELLA



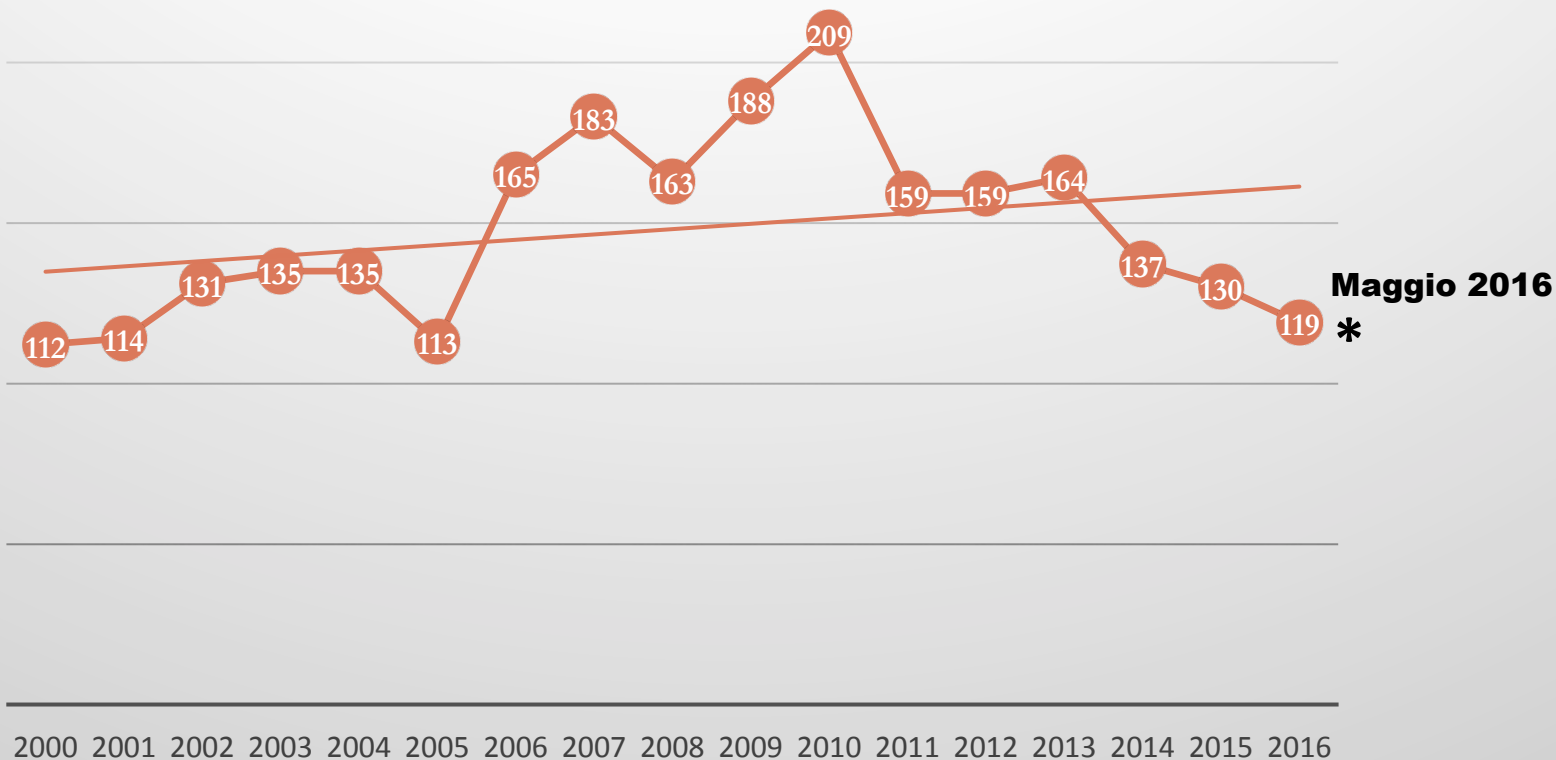
Psicopatologia del Lavoro
come termine che integri,
partendo dagli esiti psichici,
le diverse dimensioni e
fenomenologie che sono alla
base del disagio lavorativo

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CASI (n=2.516)

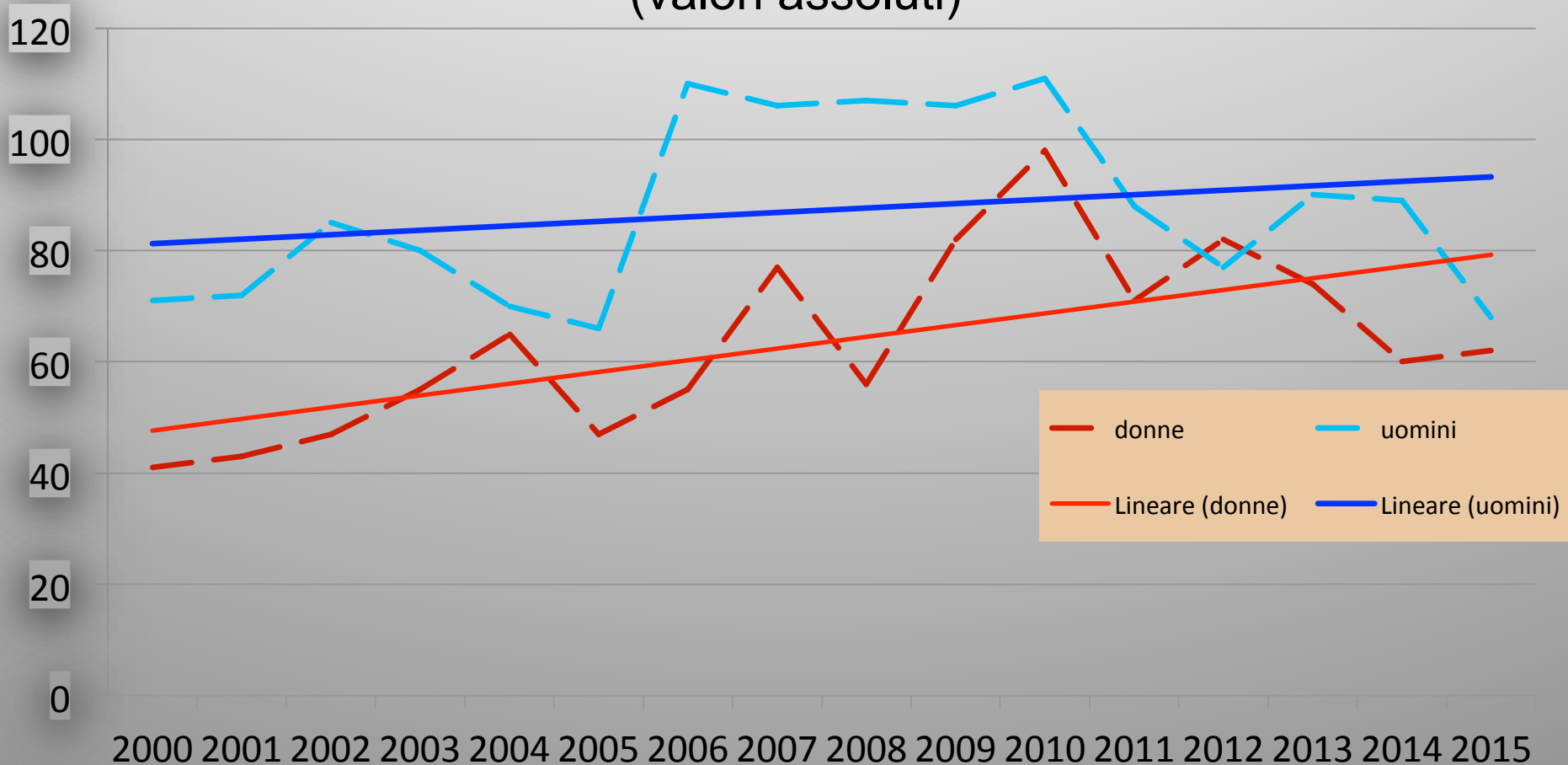


● CASI

— Lineare (CASI)

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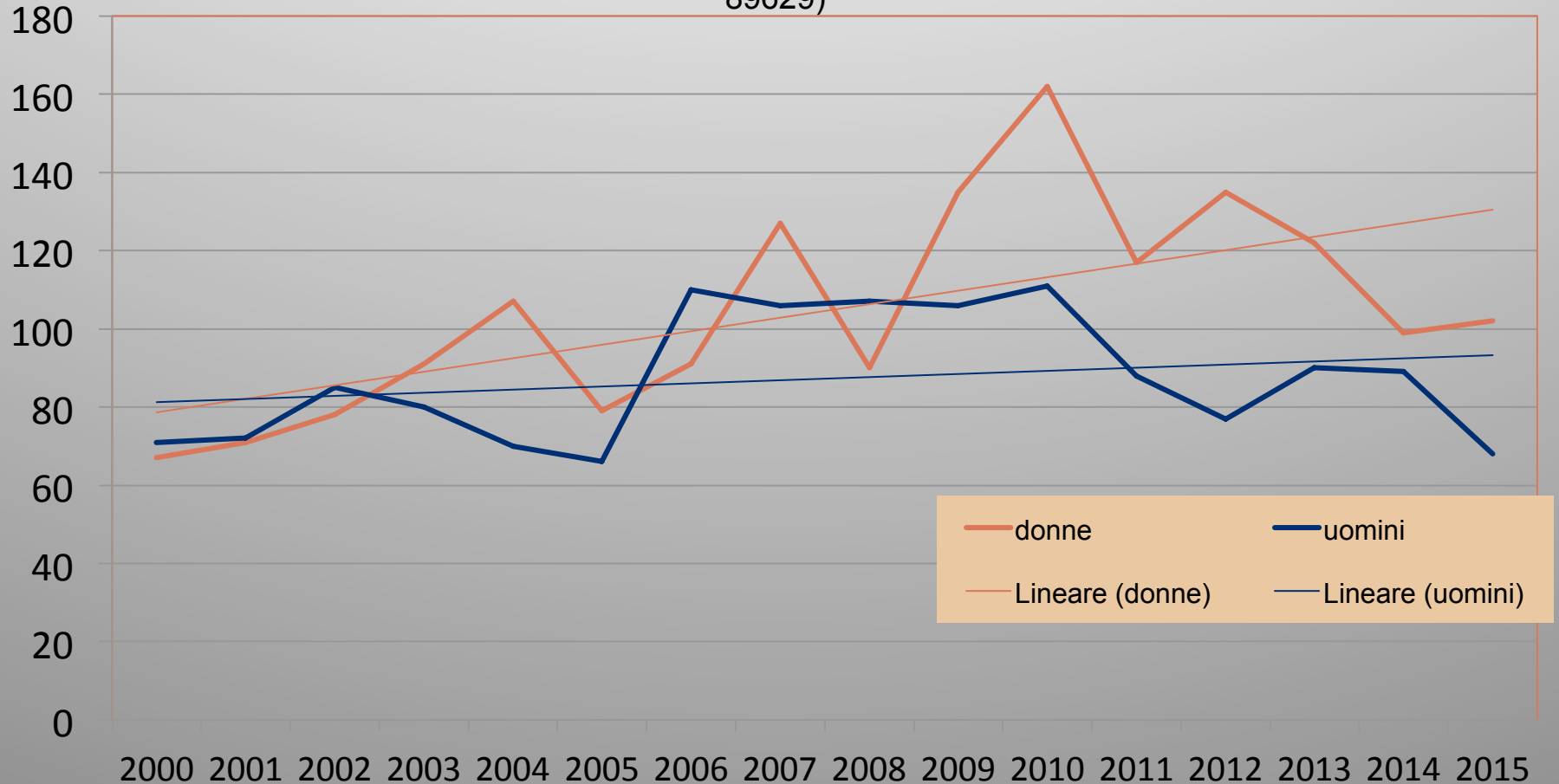
Flusso dei casi e differenze di genere
(valori assoluti)



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Flusso dei casi e differenze di genere (corretto per tassi di occupazione)

M/F 1.65/1 sulla base del numero dipendenti nel mezzogiorno 2008/2012 (Fonte <http://www.istat.it/archivio/89629>)



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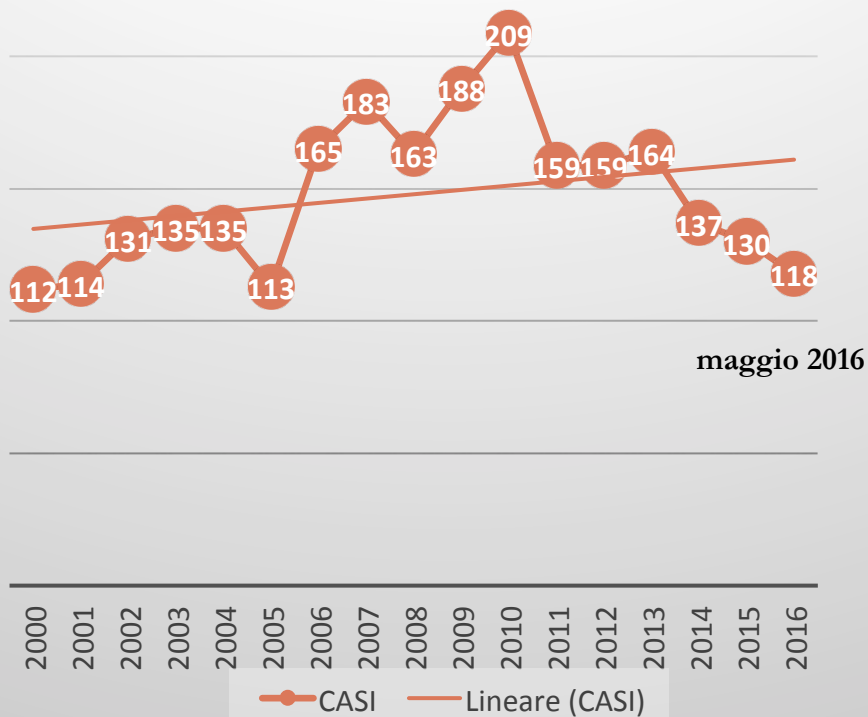
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STRUTTURA CENTRALE PSICOPATOLOGIA DA MOBBING E DISADATTAMENTO LAVORATIVO

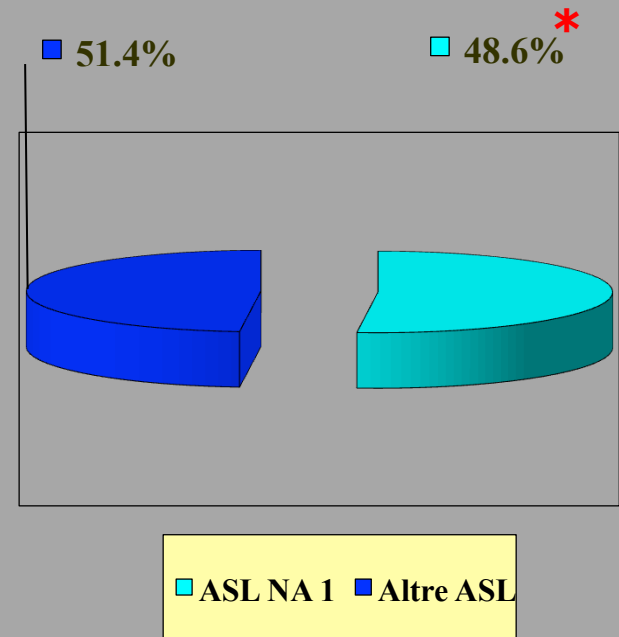
Centro di Riferimento Regione Campania

(Responsabile: Giovanni Nolfe)

CASI (n=2.516)



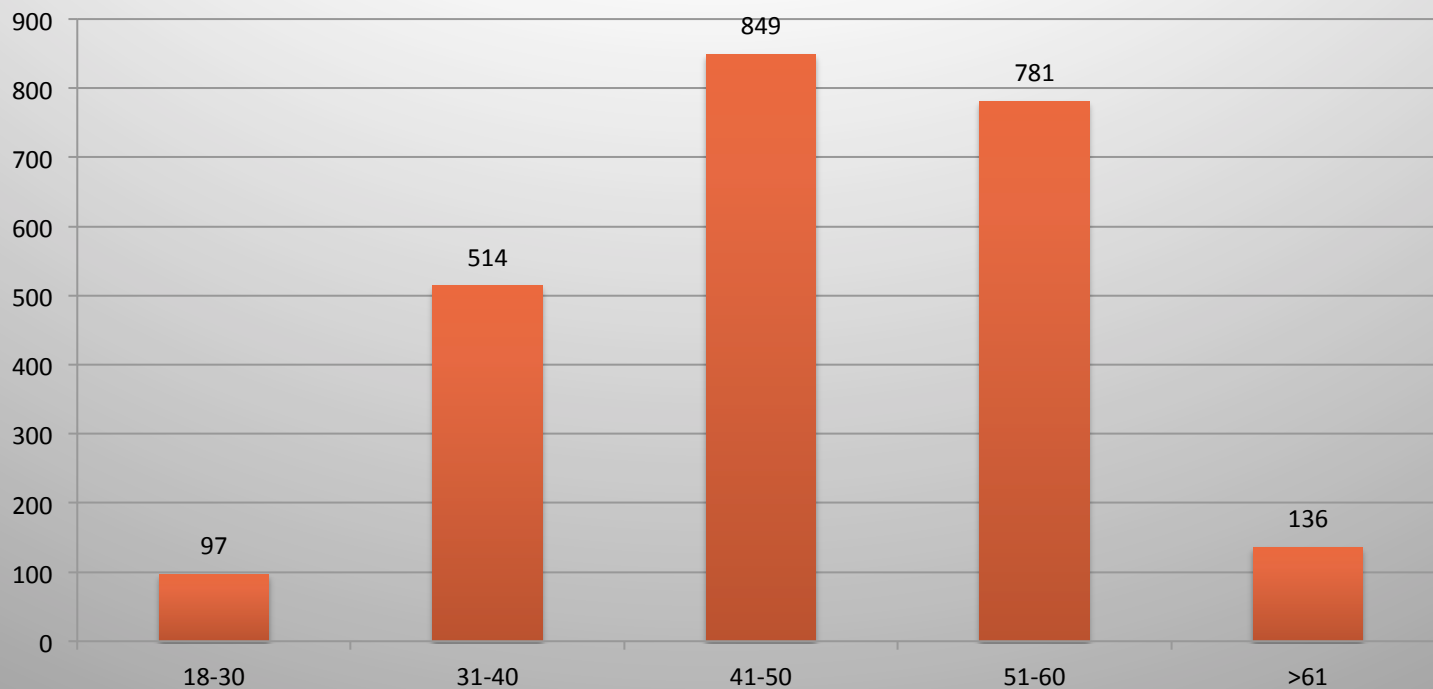
Distribuzione geografica dei soggetti



* (circa 15.6% da altre Regioni)

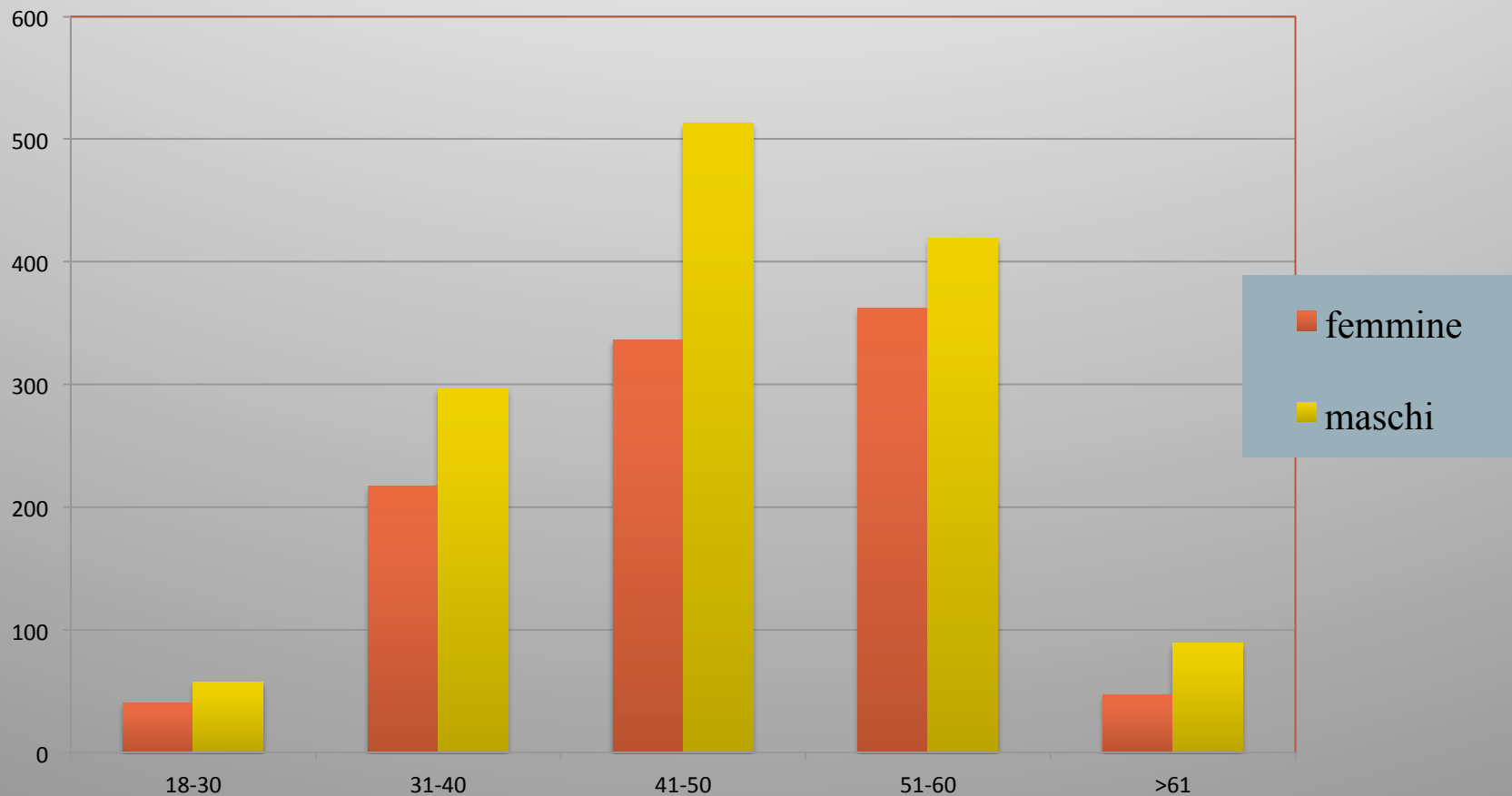
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(Responsabile: dott. Giovanni Nolfe)

Pazienti per fasce di età (n=2385)



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(Responsabile: dott. Giovanni Nolfe)

Pazienti per fasce di età e sesso (n=2385)



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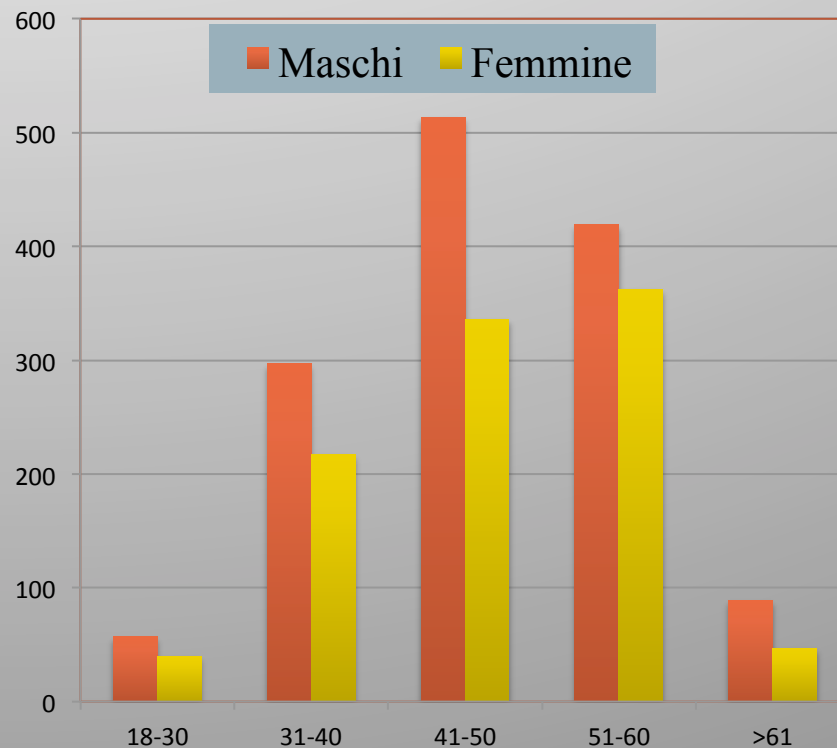
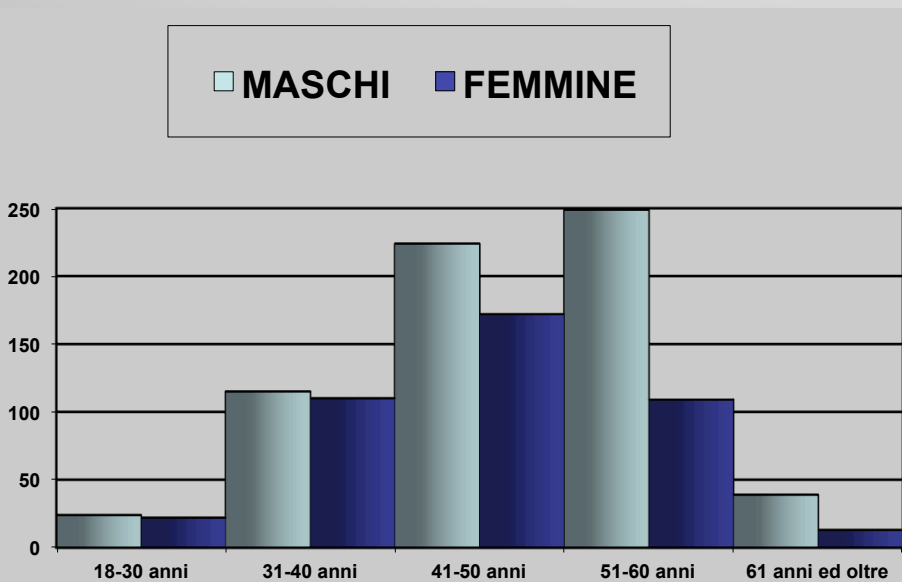
STRUTTURA CENTRALE SULLA PSICOPATOLOGIA DA MOBBING E SUL DISADATTAMENTO
LAVORATIVO

CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: Giovanni Nolfe)

2001-2007

2001-2015



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(CENTRO DI RIFERIMENTO REGIONE CAMPANIA)
(Responsabile: Giovanni Nolfe)

ESITI DEL DISAGIO LAVORATIVO

- Depressione Maggiore
- Ansia, Disturbi del sonno e Somatoformi
- Disturbi da Stress /Trauma
- Suicidi
- Disturbi Cognitivi

Psichiatrici

Organici

- Sindromi metaboliche
- Cardiovascolari
- Tabagismo
- Abuso di alcol
- Abuso di sostanze

- Problemi familiari
- Comportamenti a rischio- Impulsività
- Rischio infortuni
- Workaholism (“work addiction”)
- Karoshi

Area
Esistenziale
Relazionale
Comportamentale

Economici

- Costi sanitari
- Assenteismo
- Presenteismo
- Costi Legali

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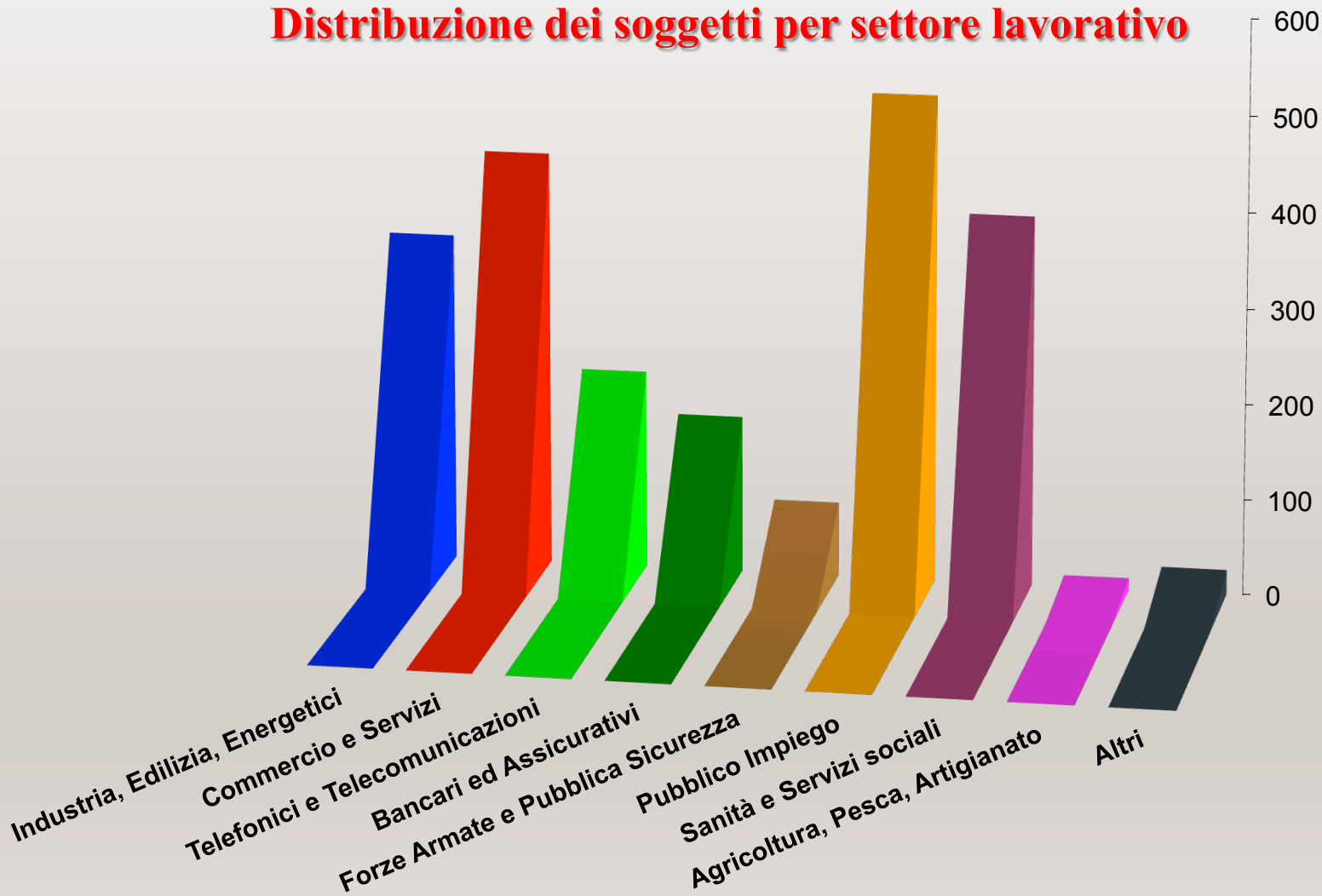
Dipartimento di Salute Mentale

STRUTTURA CENTRALE PSICOPATOLOGIA DA MOBBING E DISADATTAMENTO LAVORATIVO

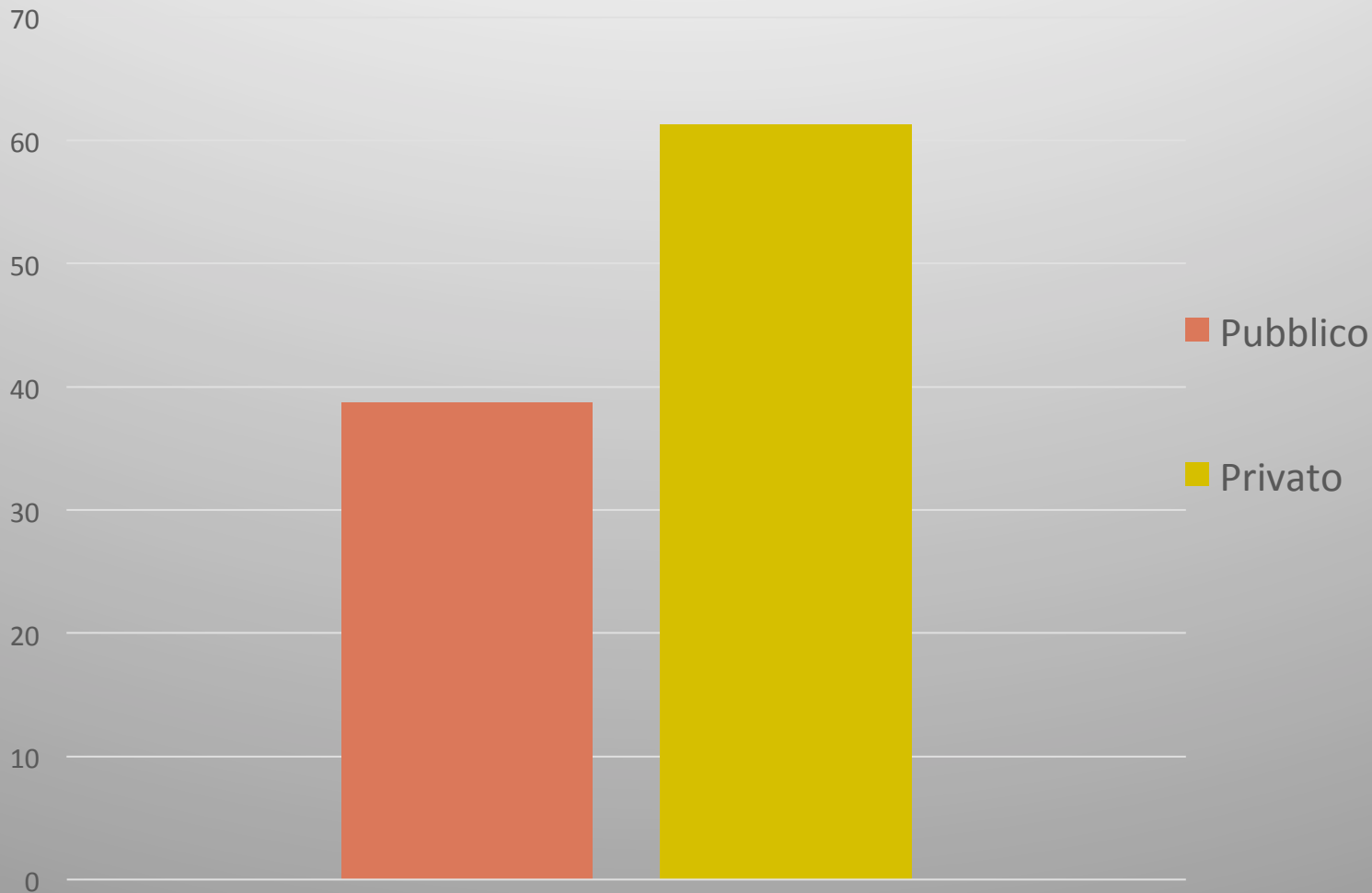
CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: Giovanni Nolfè)

Distribuzione dei soggetti per settore lavorativo

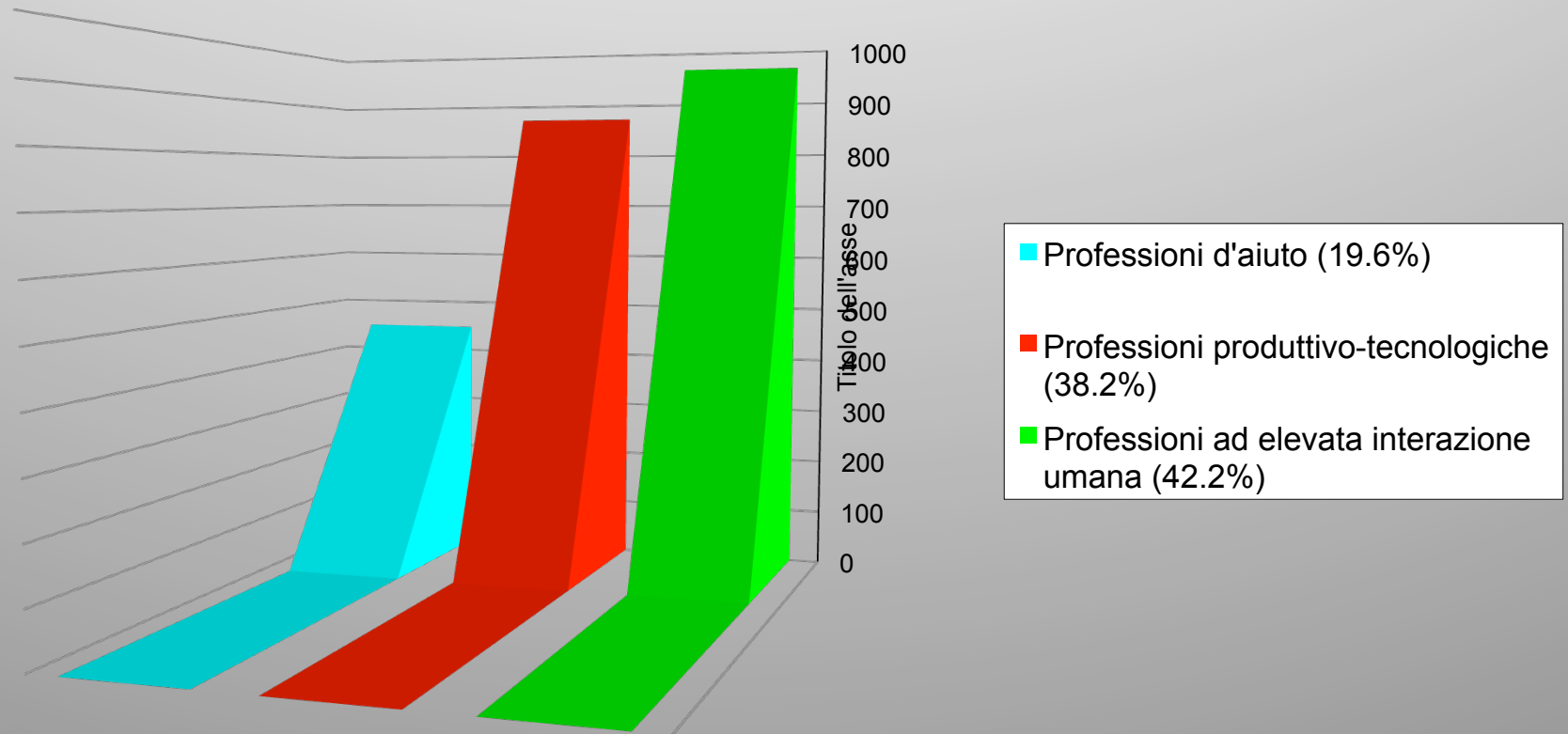


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(Responsabile: dott. Giovanni Nolfe)



Distribuzione dei casi Pubblico/Privato

Distribuzione dei soggetti per caratteristica del lavoro



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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: Giovanni Nolfe)

Modello di intervento di un Centro Clinico per le Psicopatologie lavoro-correlate

Interventi centrati sull'individuo
(6 mesi di trattamento)

Colloqui clinico-diagnostici

Trattamenti farmacologici

Trattamenti psicologici individuali
e di gruppo

Psicodiagnostica

Valutazione medico-legale (nesso
di causalità)

**Interventi centrati
sul sistema**

Terapie familiari

Focus group

**Interventi
sull'organizzazione
del lavoro**

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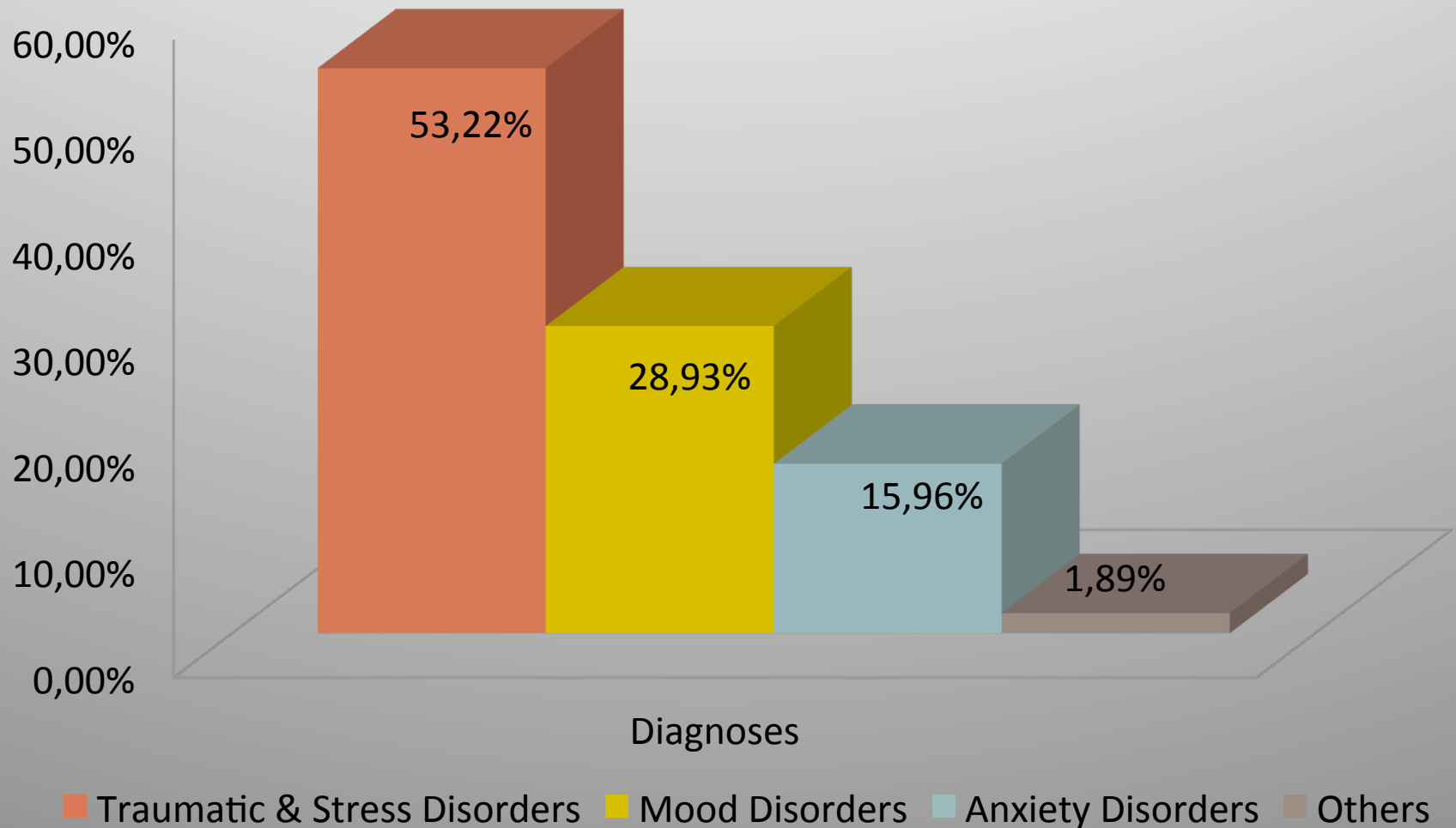
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STRUTTURA CENTRALE PSICOPATOLOGIA DA MOBBING E DISADATTAMENTO LAVORATIVO

Centro di Riferimento Regione Campania

(Responsabile: Giovanni Nolfe)

work-related psychiatric disturbances (DSM 5)



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LAVORATIVO
(CENTRO DI RIFERIMENTO REGIONE CAMPANIA)
(Responsabile: Giovanni Nolfe)

Risultati segmentazione manuale dell' ippocampo pazienti vs. controlli
(Risultati volumetrica whole-brain) mediante SIENAX®

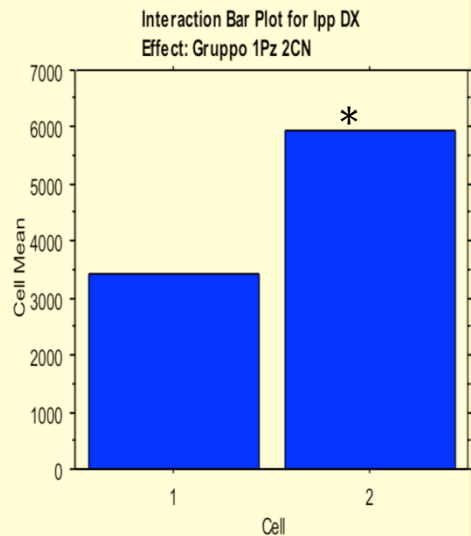
ANOVA Table for Ipp DX

	DF	Sum of Squares	Mean Square	F-Value	P-Value	Lambda	Power
Gruppo 1Pz 2CN	1	56069249,586	56069249,586	5,731	,0222	5,731	,642
Residual	35	342402505,351	9782928,724				

Means Table for Ipp DX

Effect: Gruppo 1Pz 2CN

	Count	Mean	Std. Dev.	Std. Err.
1	22	3441,530	3083,454	657,395
2	15	5948,829	3193,085	824,451



valore medio volume IPPOCAMPO dx
PZ vs CTRL: 3595,665 vs 5958,829 *p= 0,0222

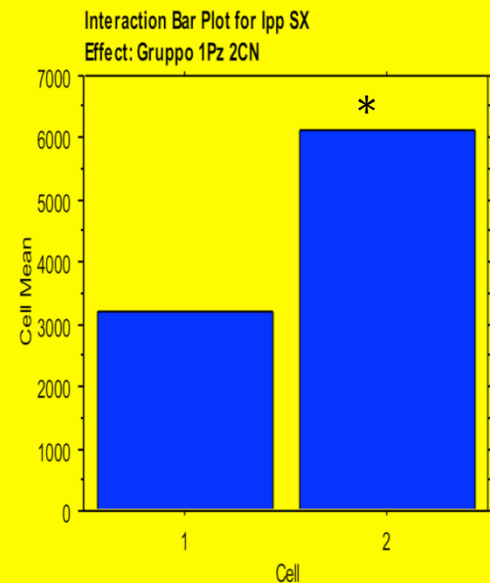
ANOVA Table for Ipp SX

	DF	Sum of Squares	Mean Square	F-Value	P-Value	Lambda	Power
Gruppo 1Pz 2CN	1	76804566,352	76804566,352	9,052	,0048	9,052	,848
Residual	35	296976015,586	8485029,017				

Means Table for Ipp SX

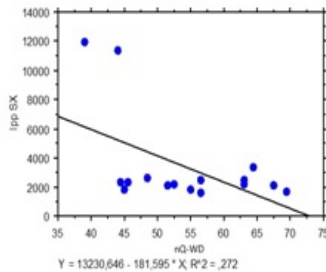
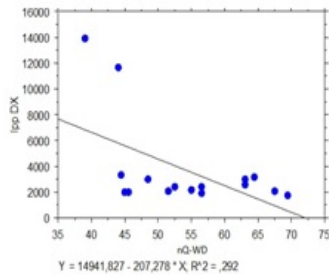
Effect: Gruppo 1Pz 2CN

	Count	Mean	Std. Dev.	Std. Err.
1	22	3202,985	2795,976	596,104
2	15	6137,507	3079,991	795,250

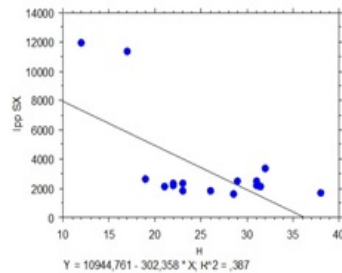
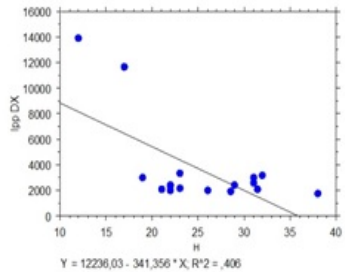


valore medio volume IPPOCAMPO sn
PZ vs CTRL: 3346,599 vs 6137,507 * p= 0,0048

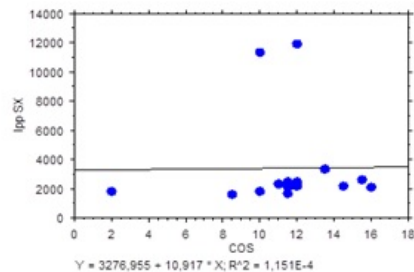
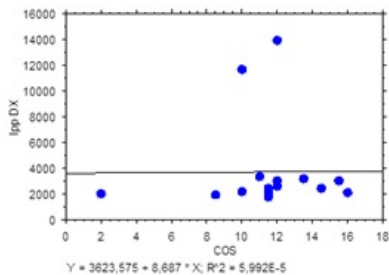
Figure 2



A) Correlation analysis between stress scores nQ-WD and the relative hippocampal volume: the hippocampus reduction volume, among patients, was related to the score of nQ-WD (right hippocampus vs. nQ-WD total score $p < 0.0309$ and left hippocampus vs. nQ-WD $p < 0.0382$)



B) Correlation analysis between stress subscores H and the relative hippocampal volume: the hippocampus reduction volume, among patients, was related to the score of the H subscale (right hippocampus vs nQ-WD scale H $p < 0.0060$ and left hippocampus vs. nQ-WD scale H $p < 0.0076$) of nQ-WD



C) Correlation analysis between stress subscores OS and the relative hippocampal volume: the relationship between hippocampus reduction volumes and measurements of organizational dysfunction (scale OS of nQ-WD) shows no significant results (right hippocampus vs nQ-WD scale OS $p < 0,977$ and left hippocampus vs nQ-WD scale OS $p < 0,9691$)

L'Atrofia Ippocampale si correla significativamente al disagio lavorativo e principalmente alle condizioni di mobbing

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(Responsabile: Giovanni Nolfè)

RIDUZIONE DELLA CORTECCIA CEREBRALE
NELLE AREE 18, 19 E 20 DI BRODMANN
ventral network of long-term memory known as “*what*
pathway” (memoria semantica, memoria autobiografica)

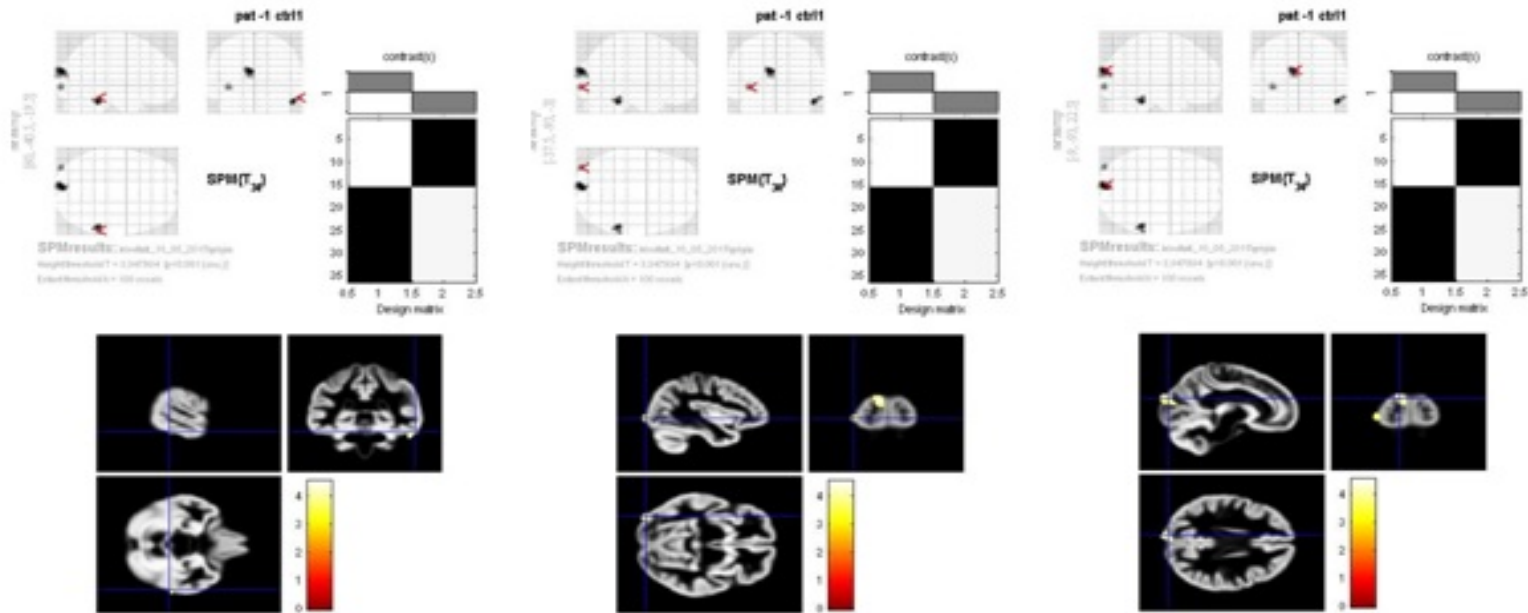


Figure 1: Reductions in the gray matter were found in three clusters among patients: the right inferior temporal gyrus (Brodmann area 20), in the left cuneus (Brodmann area 19) and the left inferior occipital gyrus (Brodmann area 18).

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(Responsabile: dr. Giovanni Nolfè)

Stress psicosociale lavorativo → riduzione della
densità recettoriale $5HT_{1A}$ sistema limbico e disconnessione
tra amigdala e giro cingolato anteriore

NeuroImage 55 (2011) 1178-1188



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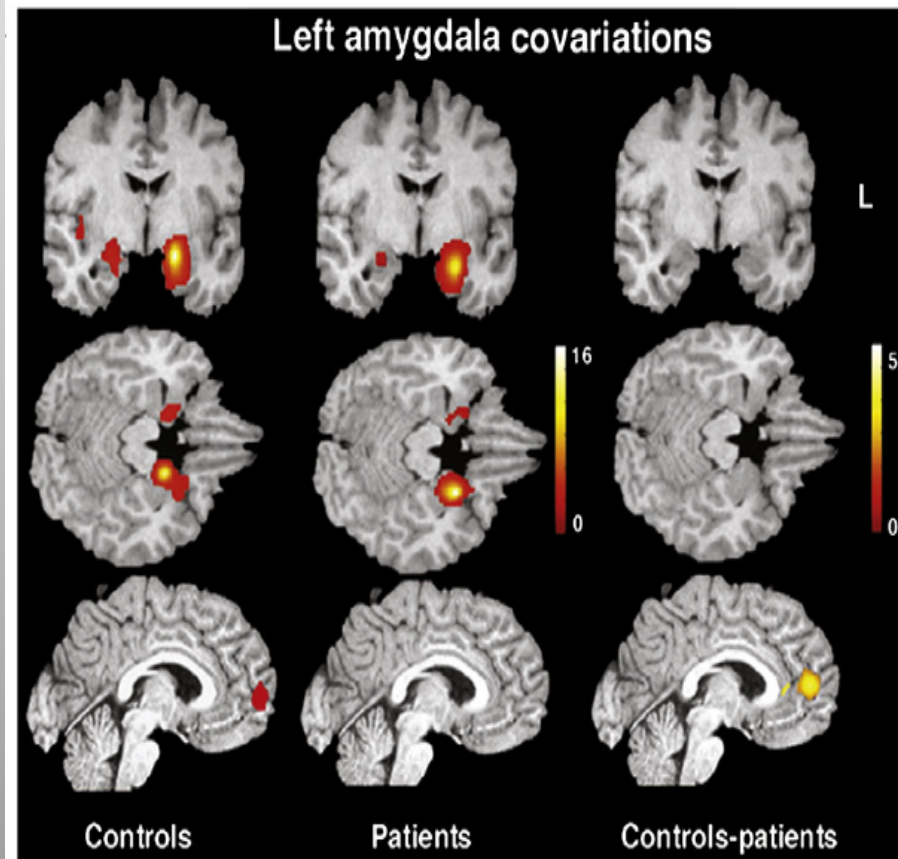
Chronic stress is linked to $5-HT_{1A}$ receptor changes and functional disintegration of the limbic networks

H. Jovanovic^a, A. Perski^b, H. Berglund^c, I. Savic^{a,*}

^a Stockholm Brain Institute, Dept. of Clinical Neuroscience, Karolinska Institute, Stockholm, Sweden

^b Stress Research Institute, Stockholm University, Stockholm, Sweden

^c Department of Medicine, Huddinge, Karolinska Institute, Stockholm, Sweden



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STRUTTURA CENTRALE PSICOPATOLOGIA DA MOBING E DISADATTAMENTO LAVORATIVO

(Responsabile: dr. Giovanni Nolfè)

Asse Ipotalamo-Ipofisi-Surrene e *distress* lavorativo

Psychother Psychosom 161
DOI: 10.1159/000XXXXX

Hypoactivity of the Hypothalamo-Pituitary-Adrenal Axis in Victims of Mobbing: Role of the Subjects' Temperament and Chronicity of the Work-Related Psychological Distress

Palmiero Monteleone^a, Giovanni Nolfè^b, Cristina Serritella^a,
Valter Milano^b, Arcangelo Di Cerbo^a, Francesco Blasi^b,
Claudio Petrella^b, Mario Maj^a

^aDepartment of Psychiatry, University of Naples SUN, and
^bDepartment of Mental Health, ASL NA-1, Naples, Italy

Key Words

Bullying at the workplace · Cortisol · Stress · Temperament ·
Character · Personality · Mobbing

Mobbing (bullying at the workplace) is a severe form of work-related psychological distress resulting from repeated hostile communications or acts directed in a systematic manner by one or more individuals toward one subjects, who is in a situation where he/she may have difficulties defending him/herself against these actions [1, 2]. The prevalence of workplace bullying varies between 2 and 17% among the studies [3–5].

Being subjected to violence at the workplace is expected to generate stress reactions, which may have severe consequences for both physical and emotional health. Indeed, associations between bullying and chronic fatigue, psychosomatic, psychological and physical symptoms, general stress reactions and posttraumatic stress disorder (PTSD) have been reported [6–8].

Stress is associated with activation of the hypothalamo-pitu-

tary of workplace bullying elaborated by Leymann [12], frequency and duration of bullying, and a self-report of being exposed to bullying. The duration of bullying exposure ranged from 9 to 78 months (mean \pm SD = 32.9 \pm 24.3 months). Control subjects were mentally healthy as assessed by the SCID-I non-patient edition [13] and did not significantly differ from patients at education and occupational levels.

All subjects were drug-free for at least 6 weeks and were physically healthy. Two female patients and 2 healthy women were postmenopausal; the remaining regularly menstruating women were tested during the follicular phase of menstrual cycle. All subjects provided written informed consent to participate in the study.

The self-administered Temperament and Character Inventory-Revised (TCI-R) of Cloninger [14] was used to assess subjects' character and temperament characteristics. Subjects were asked to go to sleep at their habitual sleep time and to awake at 06.00 a.m.; they collected saliva samples immediately after awakening and at 08.00, 12.00, 16.00 and 20.00 h of the day. Participants collected saliva at home into Salivette tubes that were stored in home freezers before being returned to the lab. Saliva cortisol concentrations were determined by ELISA method, using a commercial kit (Biochem Immunosystem, Milan, Italy).



The BMDP statistical software package [15] was used for data analysis. Two-way analysis of variance (ANOVA) with repeated measures, one-way ANOVA, the post-hoc Tukey's test, the Pearson's correlation test and the stepwise multiple regression were used where appropriate.

Bullied subjects exhibited significantly higher levels of harm avoidance (106 \pm 18.6 vs. 84.4 \pm 9.7; $F_{1,18} = 10.80$, $p = 0.004$) and lower levels of self-directedness (128.4 \pm 17.7 vs. 156.4 \pm 9.9; $F_{1,18} = 18.96$, $p = 0.0004$) as compared to controls.

As for saliva cortisol levels, two-way ANOVA with repeated measures showed significant effects for group ($F_{1,18} = 15.97$, $p = 0.0008$) and time ($F_{4,72} = 12.82$, $p < 0.00001$) and a significant group \times time interaction ($F_{4,72} = 5.14$, $p = 0.001$). In the bullied

In conclusion, victims of mobbing are characterized by a reduced tonic activity of the HPA axis, which seems to be related to both the chronicity of being exposed to workplace bullying and increased levels of harm avoidance.

ESPOSIZIONE CRONICA ALLO STRESS

- Alterazioni dell'ASSE Ipotalamo-Ipofisi-Surrene ( atrofia ippocampale?)
- Attivazione del sistema delle Citochine ( danni infiammatori neuronali?)
- Accelerazione dei processi di *aging* cerebrale

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E DISADATTAMENTO LAVORATIVO
(Responsabile: dr. Giovanni Nolfo)

DISAGIO LAVORATIVO E DISTURBI COGNITIVI

La possibilità che lo stress e lo *strain* lavorativi siano associati ad un incremento del rischio di demenza è stata messa in evidenza nello *Kungsholmen Project* (uno studio longitudinale sulla popolazione di un distretto della città di Stoccolma, condotto dallo Stockholm Gerontology Research Center; *H.X.Wang et al., Alzheimers Dement, 2012*)

“Work-related stress, including low job control and low social support at work, may increase the risk of dementia, particularly VaD. Modification to work environment, including attention to social context and provision of meaningful roles for employees, may contribute to efforts to promote cognitive health”.
(R.Andel *Am Geriatr Soc, 2012*)

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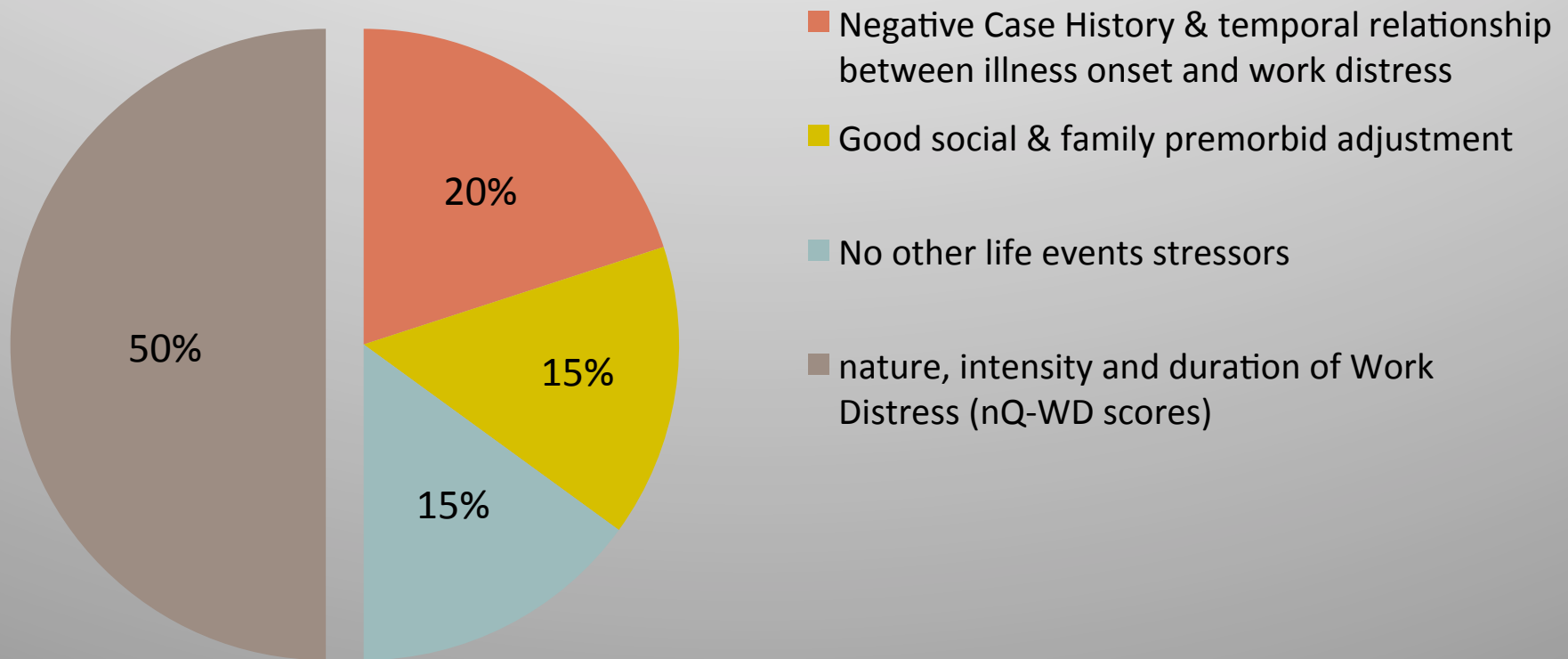
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Centro di Riferimento Regione Campania

(Responsabile: Giovanni Nolfo)

Work Pathogenic Degree (variables)



0 points (no working pathogenesis)

100 points
(maximum working pathogenesis)

Giovanni Nolfè¹, Claudio Petrella¹, Maria Triassi², Gemma Zontini³, Simona Uttieri¹, Alessia Pagliaro¹, Francesco Blasi¹, Antonella Cappuccio² e Giuseppe Nolfè⁴

Mobbing, costrittività organizzative ed effetti bio-psico-sociali: una valutazione integrata. Dati preliminari di validazione del Questionario-napoletano sul Disagio Lavorativo (Qn-DL)

¹ Struttura Centrale di Psicopatologia da Mobbing e Disadattamento Lavorativo ASL Napoli 1 Centro

² Dipartimento di Scienze Mediche Preventive Università Federico II di Napoli

³ Servizio di Psichiatria Ospedale "V. Monaldi", Napoli

⁴ Istituto di Cibernetica "E. Caianiello", Consiglio Nazionale delle Ricerche, Pozzuoli

RIASSUNTO. L'obiettivo dello studio è di validare uno strumento di valutazione, il *Questionario-napoletano sul Disagio Lavorativo* (Qn-DL), delle condizioni di disagio percepite nell'ambito lavorativo differenziando tra i fenomeni disfunzionali maggiormente legati alle anomalie delle relazioni intersoggettive ed alle vessazioni individuali (mobbing) da quelle più chiaramente connesse ad anomalie delle modalità organizzative nel loro complesso (costrittività organizzativa). Il questionario misura complessivamente l'effetto di queste due aree sul soggetto e le ricadute in termini di funzionamento bio-psico-sociale.

Il questionario è stato sottoposto a soggetti che presentavano un disturbo psicopatologico connesso a condizioni di disagio lavorativo e ad un gruppo di controllo sovrapponibile per le diverse caratteristiche socio-demografiche e lavorative. L'analisi statistica ha dimostrato un grado di significativa validità ed attendibilità del questionario. Il grado di coerenza interna delle domande proposte è soddisfacente. Le curve ROC consentono la determinazione di un valore soglia che consente di separare i soggetti sottoposti a condizioni di mobbing e/o costrittività organizzativa dai controlli con un grado di affidabilità ottimale. I valori dell'area sottesa dalle curve ROC indicano che il questionario ha una alta capacità discriminante. tali dati vanno considerati come preliminare poiché studi ulteriori, su più ampie casistiche, saranno tese ad analizzare la struttura interna del questionario mediante tecniche multivariate, quali l'analisi dei fattori o l'analisi delle componenti principali.

Parole chiave: mobbing, costrittività organizzativa, questionario, rischio psicosociale, valutazione del rischio.

Introduzione

Negli ultimi due decenni la condizione del disagio e dello stress psicologico vissuto in ambito lavorativo è stato oggetto di una analisi sempre più approfondita nella comunità scientifica che ne ha sottolineato sia gli esiti psicopatologici e psicosomatici (1-6) che le ricadute in termini economici (7-8).

Nell'ambito lavorativo queste forme di *distress* appaiono connesse principalmente a tre ordini di fattori: a) i conflitti relazionali, b) le anomalie organizzative e c) le condizioni di insicurezza lavorativa. Naturalmente esiste un ampio grado di sovrapposizione tra queste dimensioni e sul piano categoriale non è sempre possibile distinguere i singoli fenomeni o considerarli appartenenti in maniera esclusiva all'una o all'altra di tali dimensioni. Sul piano descrittivo, infatti, alcuni comportamenti o condizioni (come il demansionamento ad esempio) possono essere espressione sia di un conflitto relazionale, che di un mal-funzionamento organizzativo oltre che avere effetti negativi sul sentimento di sicurezza sociale e lavorativa dell'individuo.

Gli elementi caratteristici della conflittualità relazionale sono:...

I valori delle scale M e COS permettono di definire con maggiore precisione se la percezione soggettiva (tanto dei fattori di disagio individuale che organizzativo) rientrano in un ambito disfunzionale. Una terza scala offre una misura degli effetti sul piano bio-psico-sociale.

Tabella VI. Parametri riassuntivi delle curve ROC

	Costrittività	Mobbing	Punteggio Totale
AUC	0.91	0.95	0.95
CUT-OFF	10.5	13	34
Sensibilità	0.812	0.879	0.845
Specificità	0.837	0.837	0.922
Valore predimivo positivo	0.852	0.861	0.926
Valore predimivo negativo	0.794	0.857	0.838

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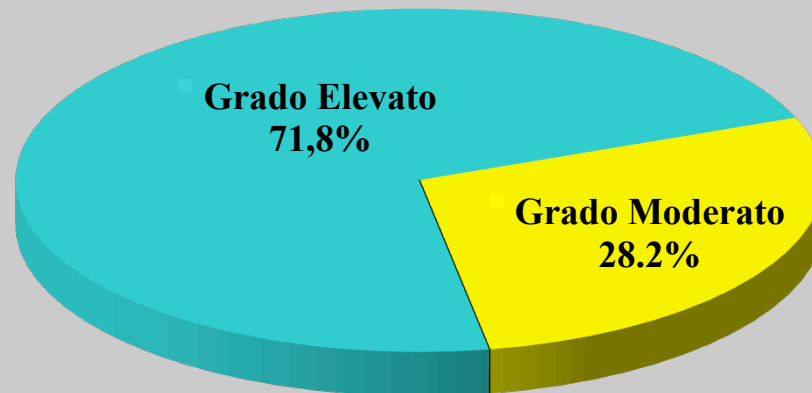
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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: G.Nolfe)

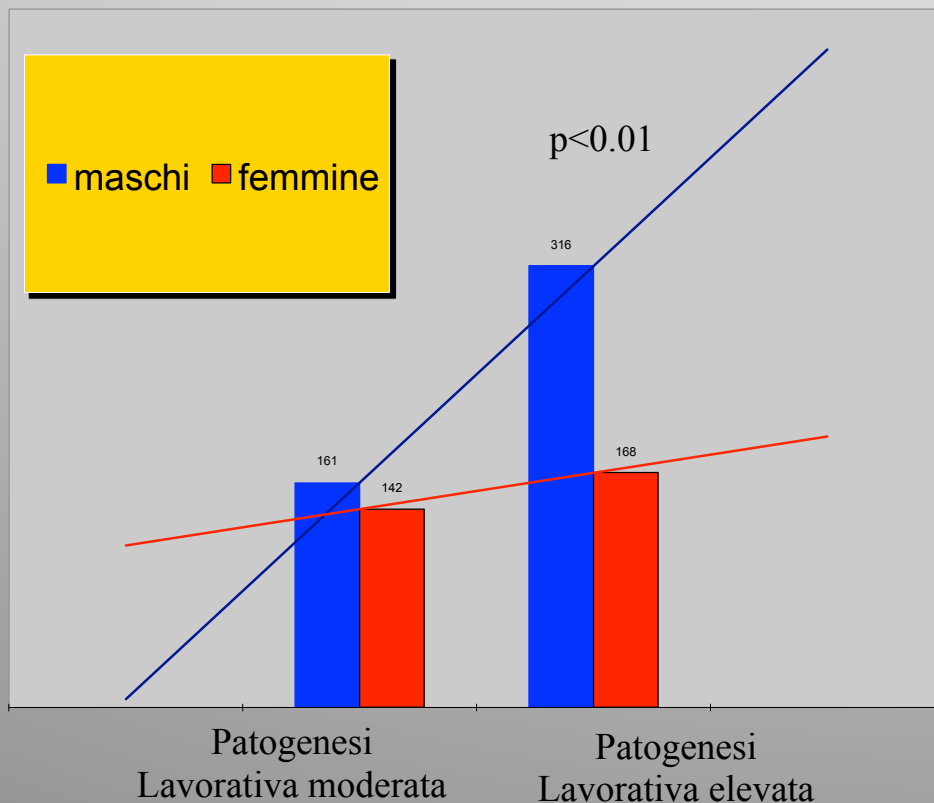
**Distribuzione dei pazienti ad elevata patogenesi lavorativa e
pazienti a moderata patogenesi lavorativa**



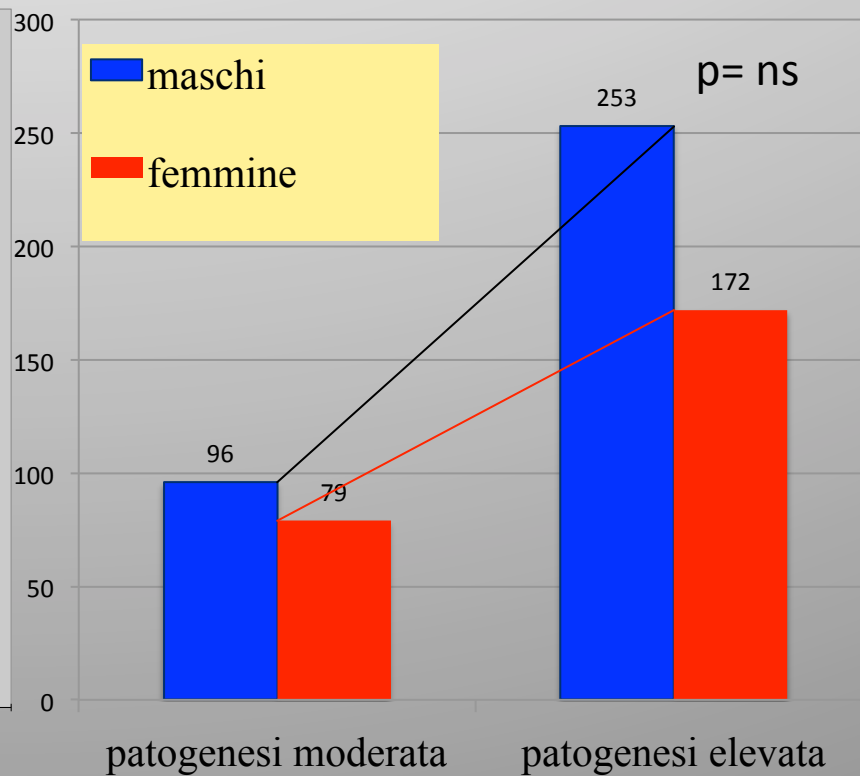
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(Responsabile: Giovanni Nolfè)

Patogenesi Lavorativa e differenze di genere

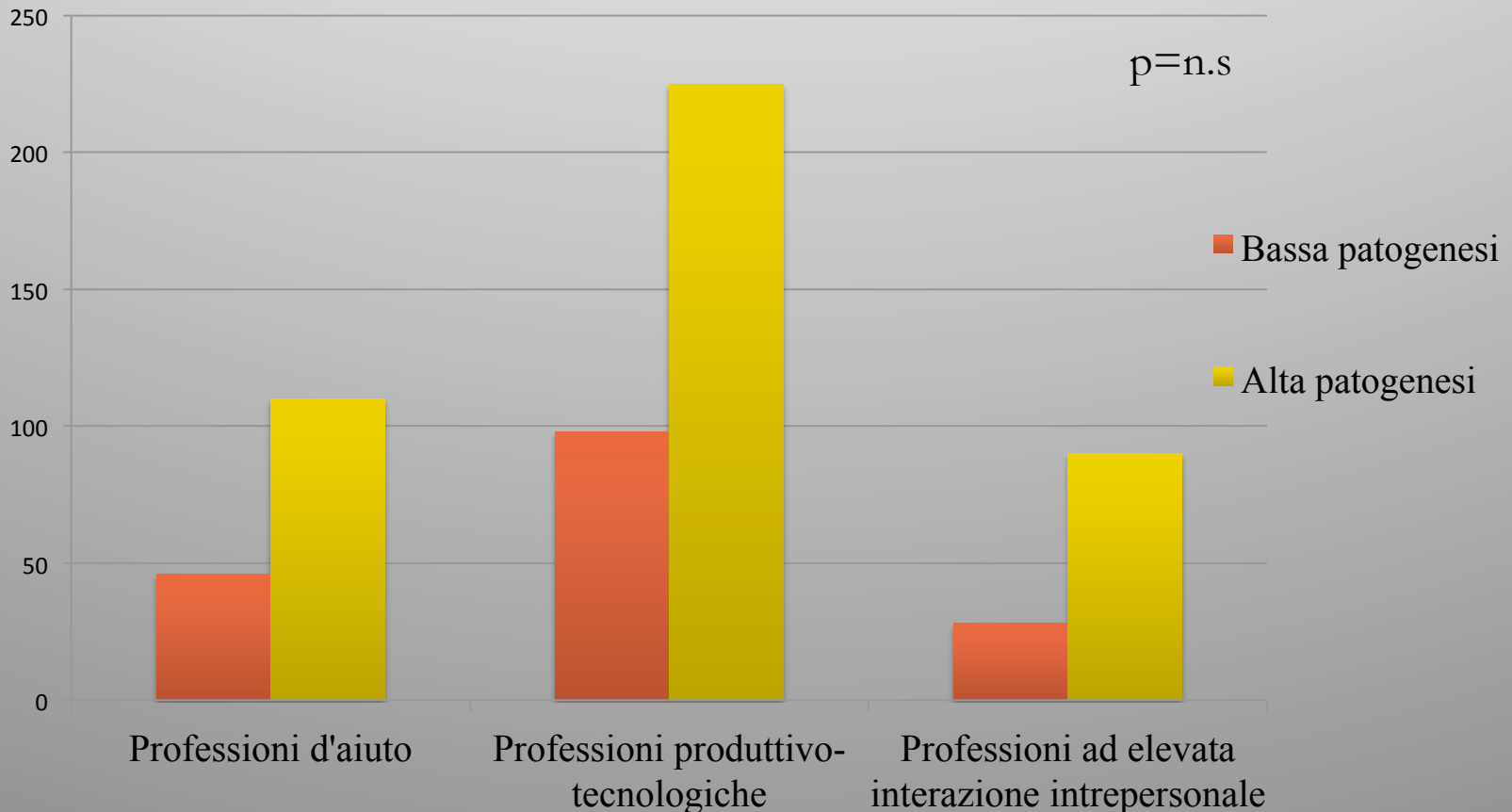
2001-2007



2008-2015



Patogenesi Lavorativa e Tipologia del Contenuto Lavorativo



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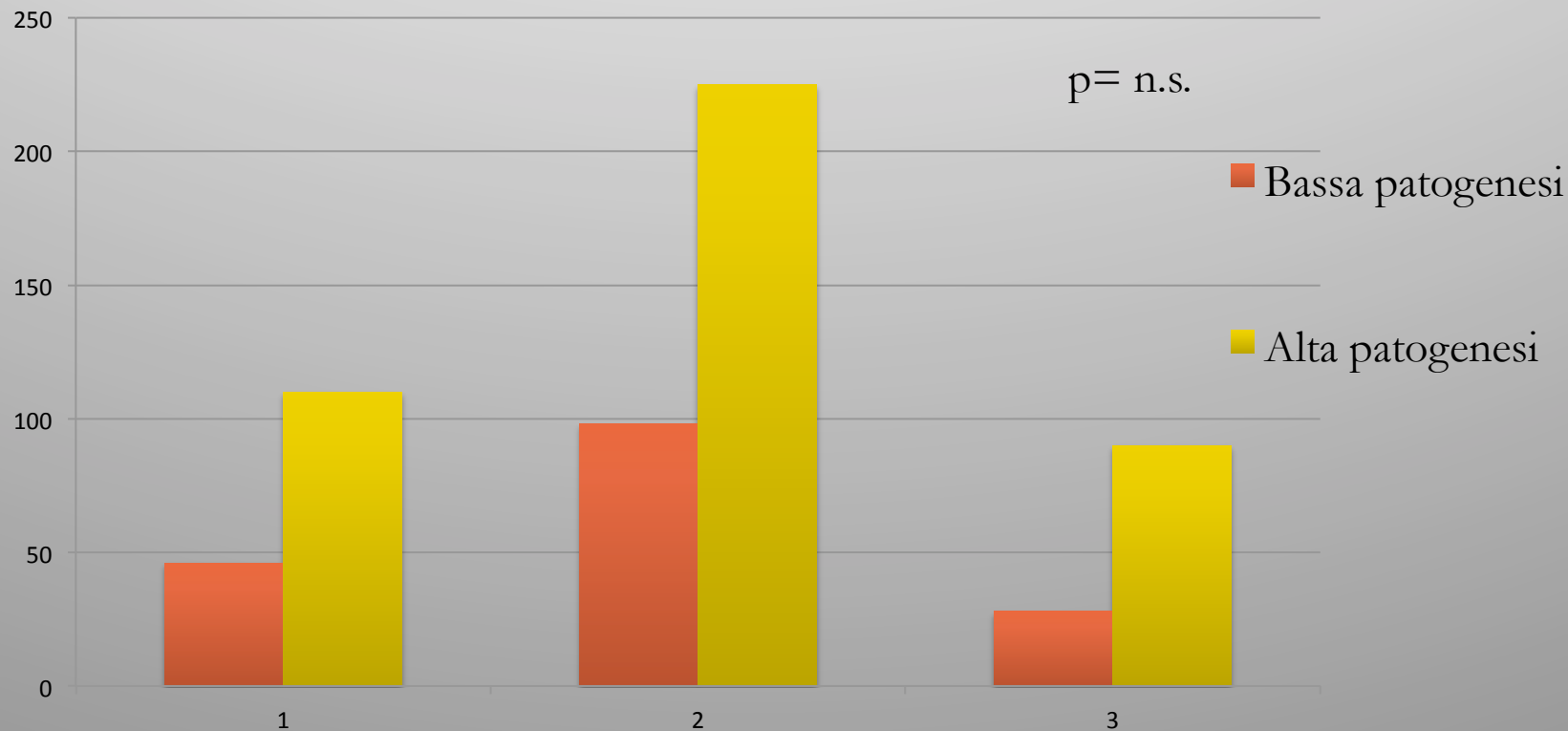
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(Responsabile: Giovanni Nolfe)

Patogenesi e Livello Lavorativo



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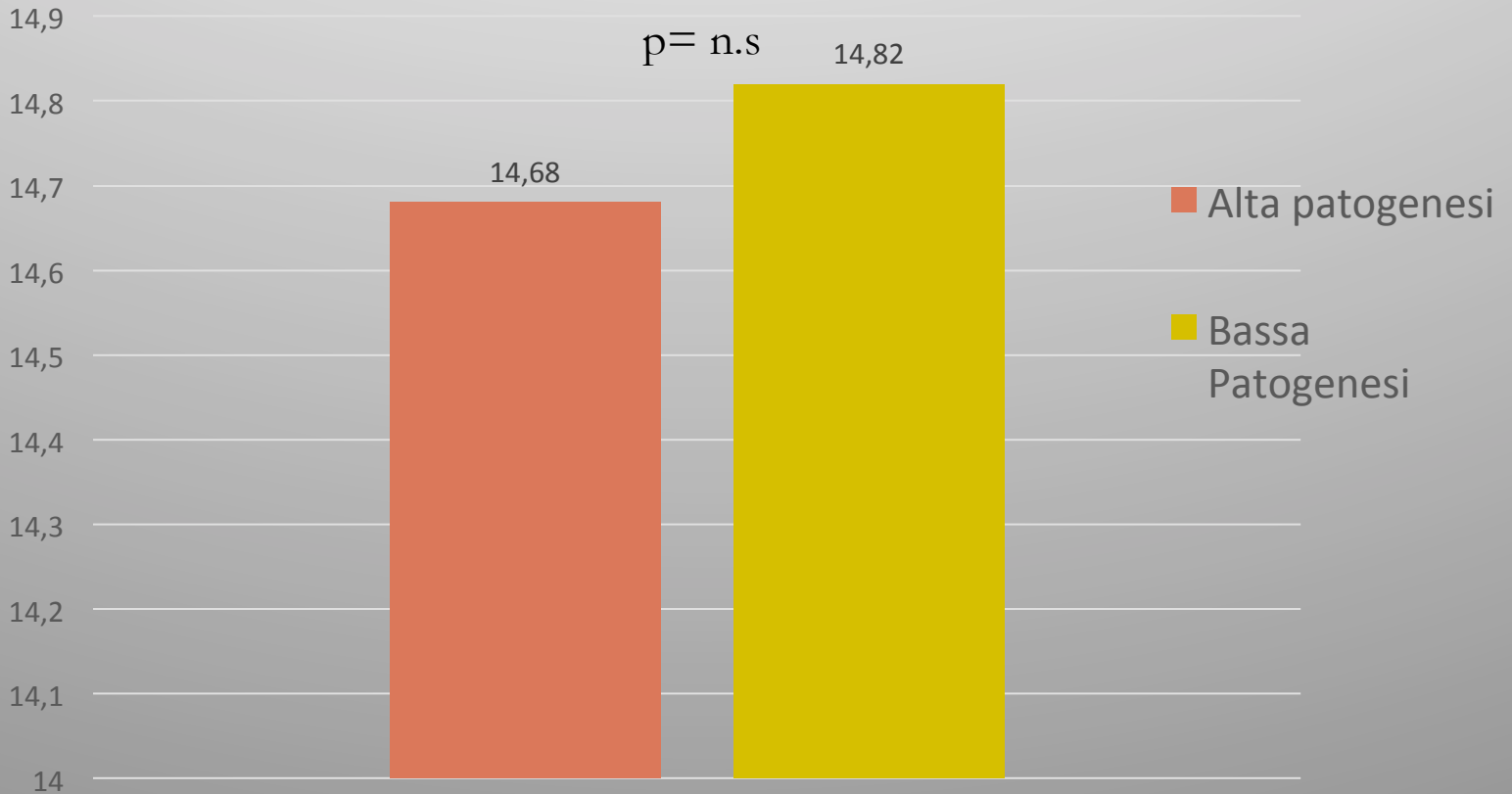
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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: dott. Giovanni Nolfe)

Patogenesi e scolarità



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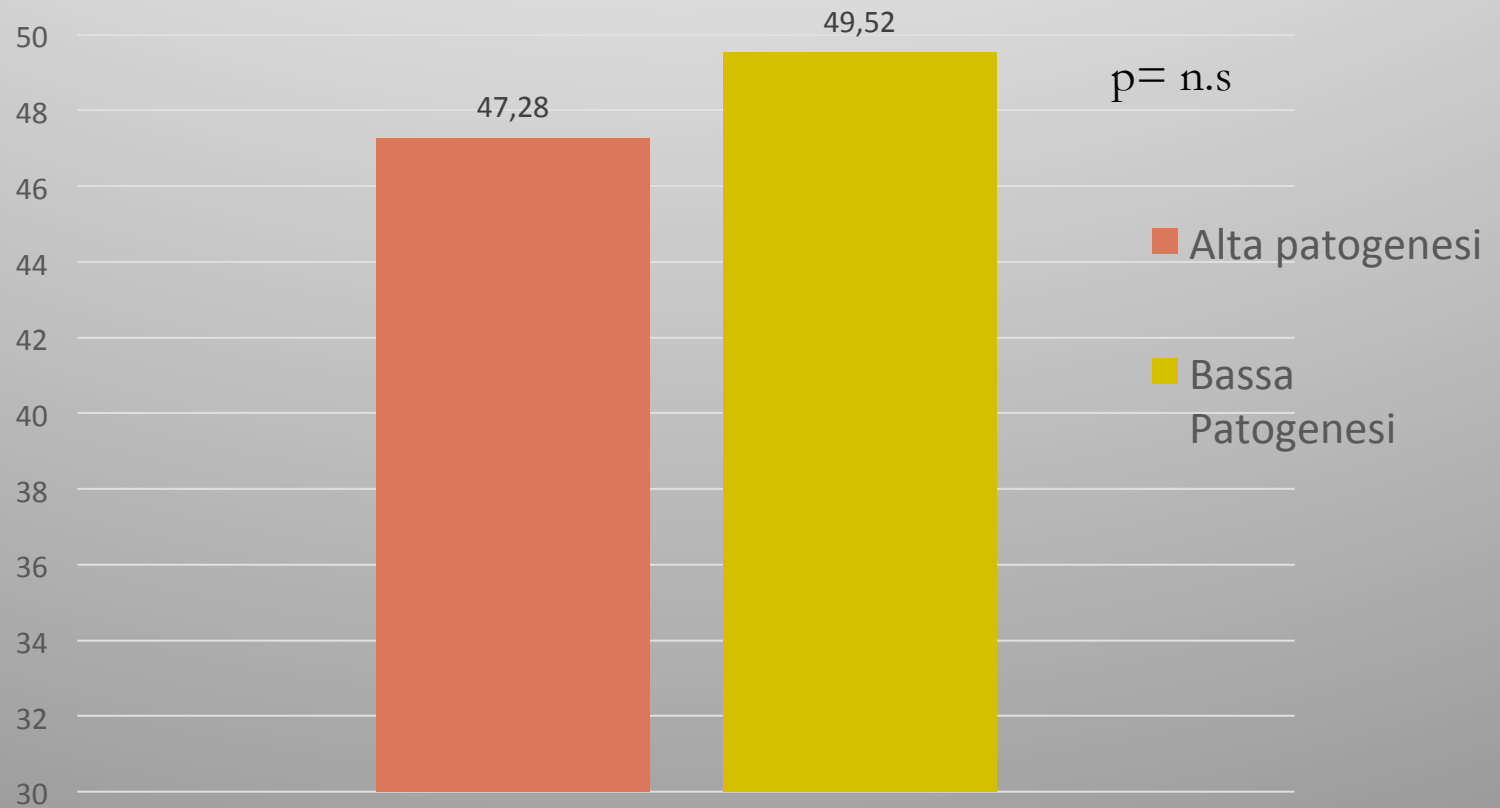
DIPARTIMENTO DI SALUTE MENTALE

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(Responsabile: dott. Giovanni Nolfe)

Patogenesi ed Età anagrafica



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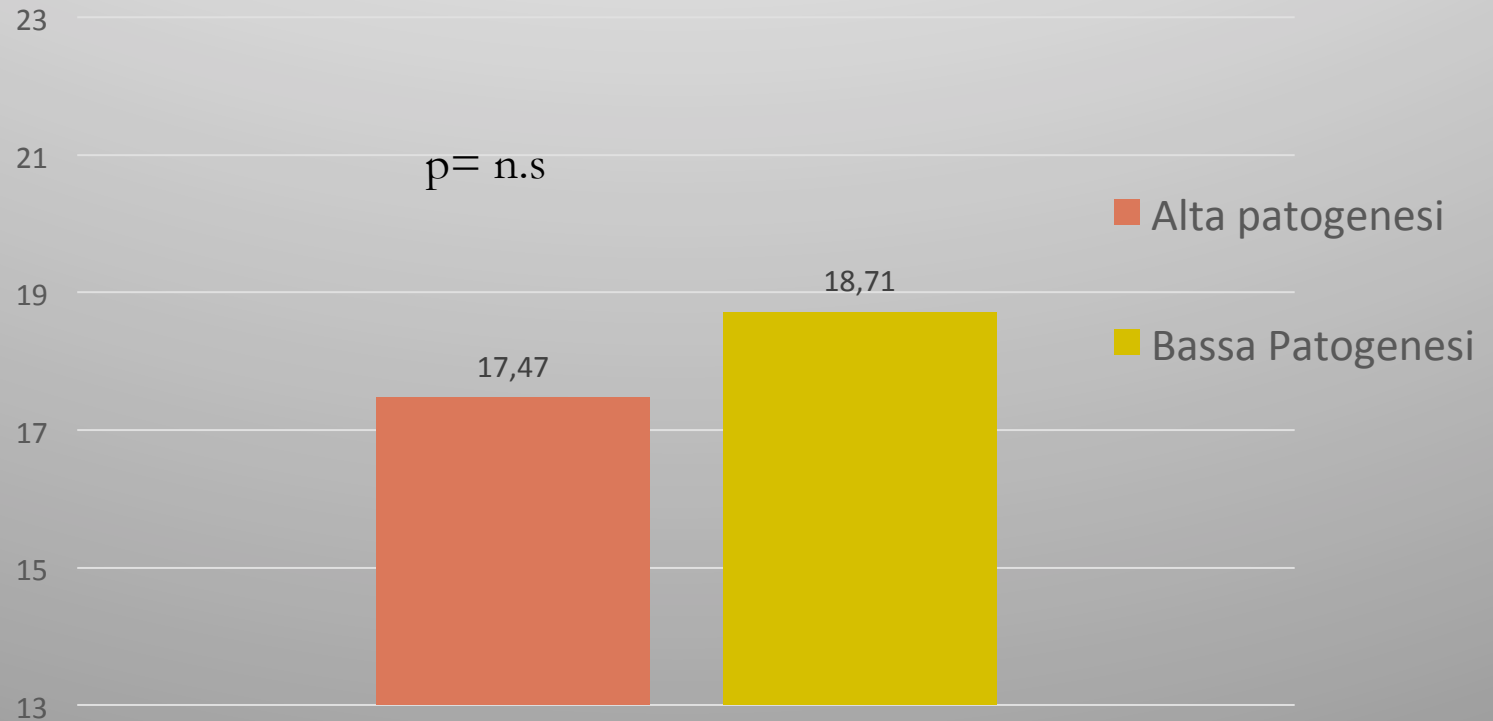
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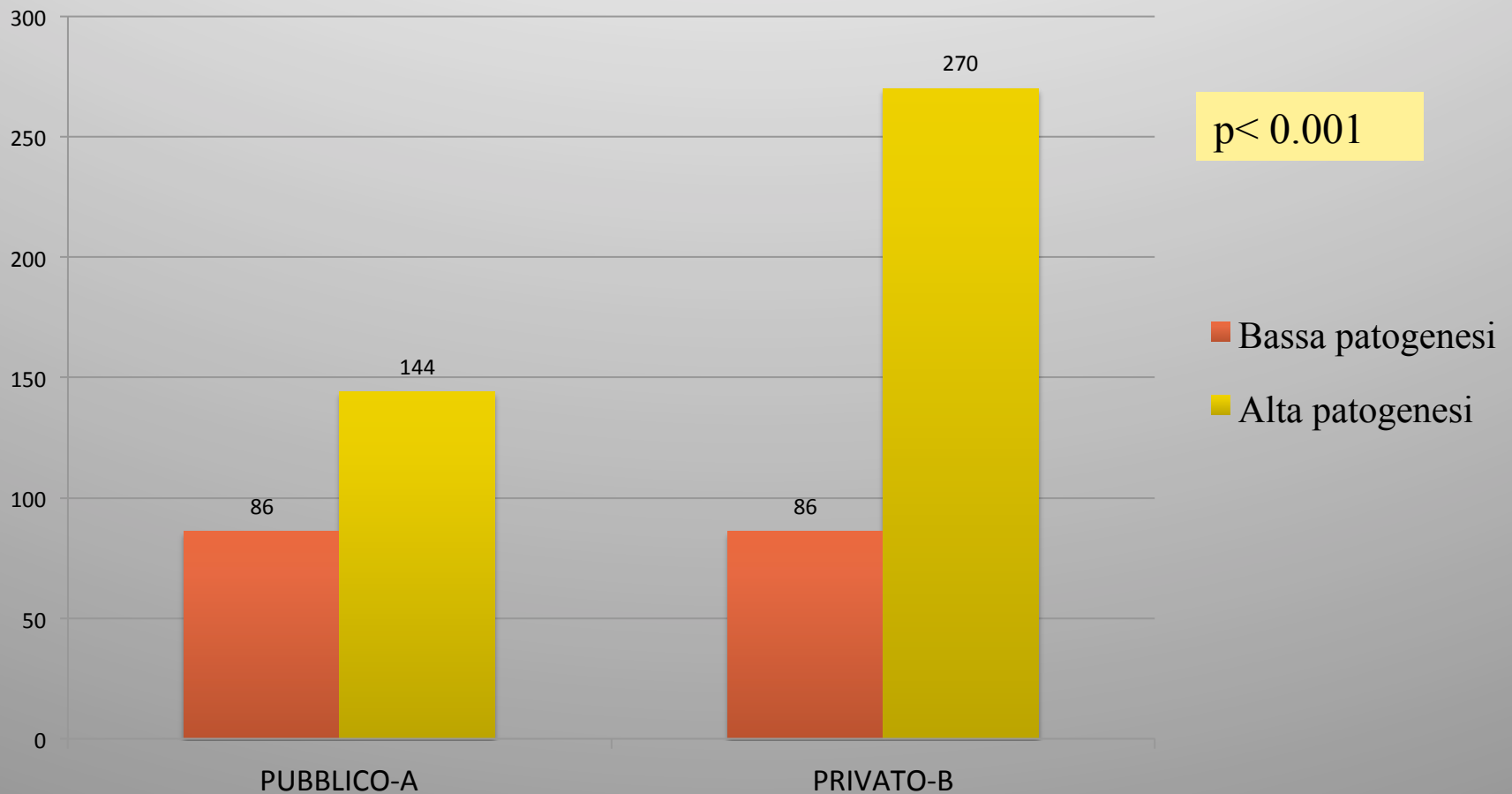
(Responsabile: dott. Giovanni Nolfe)

Patogenesi ed Anni di Lavoro



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(Responsabile: Giovanni Nolfe)

Patogenesi Lavorativa: differenze tra settore Pubblico e Privato



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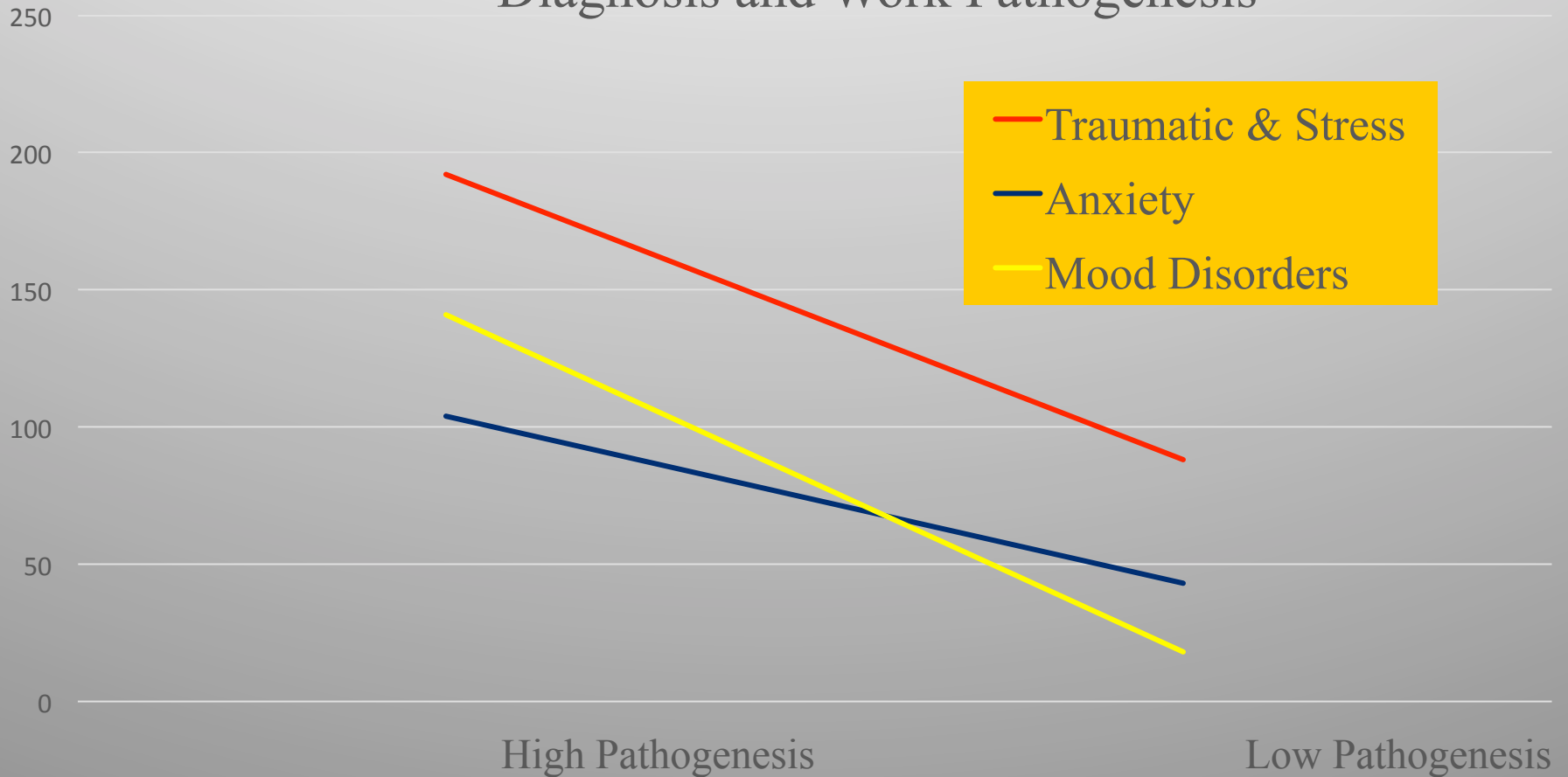
Struttura Centrale di Psicopatologia da Mobbing e Disadattamento

Lavorativo

Centro di Riferimento Regione Campania

(Responsabile dott. Giovanni Nolfe)

Diagnosis and Work Pathogenesis



Azienda Sanitaria Locale Napoli 1 centro

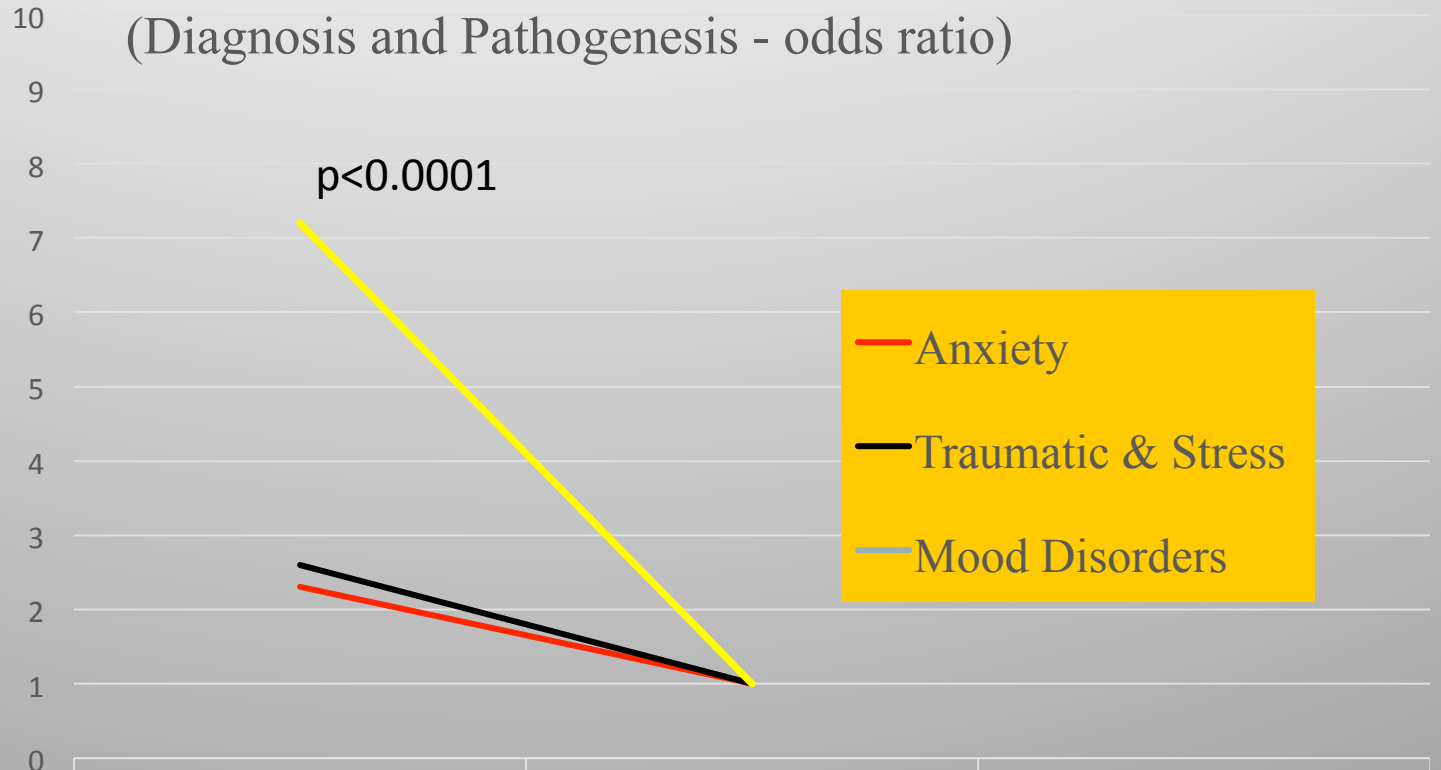
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Lavorativo

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(Responsabile dott. Giovanni Nolfe)

(Diagnosis and Pathogenesis - odds ratio)



	High Work Pathogenesis	Low Work Pathogenesis	
Anxiety	2,3	1	
Traumatic & Stress	2,6	1	
Mood Disorders	7,2	1	

International Journal of Mental Health, vol. 36, no. 4, Winter 2007–8, pp. 67–85.
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ISSN 0020–7411/2008 \$9.50 + 0.00.
DOI 10.2753/IMH0020-7411360406

GIOVANNI NOLFE, CLAUDIO PETRELLA,
FRANCESCO BLASI, GEMMA ZONTINI, AND
GIUSEPPE NOLFE

Psychopathological Dimensions of Harassment in the Workplace (Mobbing)

ABSTRACT: *Aims: This study (a) evaluates the subjective perception and the psychopathological effects on workers subjected to harassment at the workplace, (b) examines the pathogenic relation between workplace harassment and psychiatric aspects, and (c) assesses the correlation between socio-demographic variables and the pathogenic extent of this phenomenon. Method: The study was carried out with the participation of 733 workers who approached the Work Psychopathology Medical Centre of the Department of Mental Health of Naples (Italy); 533 (73 percent) completed the diagnostic trial. Diagnoses were made in accord to the Diagnostic and Statistical Manual of Mental Disorders (4th edition, revised) criteria. Each individual was graded on an empirical scale to quantify the correlation between diagnosis and harassment at the workplace. Two groups, with the highest and the lowest degrees of working pathogenesis, were compared. Statistical analysis was carried out to study the correlation between diagnoses and working pathogenesis. Results: The greatest subjective perception of mobbing is found among workers of high (managers, officials, etc.) and medium (employees, white-collar workers, etc.)*

Soc Psychiat Epidemiol
DOI 10.1007/s00127-009-0155-9

ORIGINAL PAPER

Association between bullying at work and mental disorders: gender differences in the Italian people

Giovanni Nolfo · Claudio Petrella · Gemma Zontini ·
Simona Uttieri · Giuseppe Nolfo

Received: 30 June 2008 / Accepted: 6 October 2009
© Springer-Verlag 2009

Abstract

Background In the last few years the international literature has shown an increasing attention for the work as life-event stressor, for its organizational characteristics as well as for job insecurity and interpersonal conflicts.

Methods We have studied 707 subjects who approached the Work Psychopathology Medical Centre of Naples to evaluate the DSM IV diagnoses and the degree of bullying at the workplace according to Leymann's definition. Two groups, with high and with low severity of bullying, were compared, mainly in relation to gender differences.

Results The more frequent diagnoses were anxiety disorders (8.7% of the total), mood disorders (31.5%) and adjustment disorders (58.3%). The patients with higher degree of bullying were 55.7% among the subjects with anxiety disorders, 51.4% among the patients with adjustment disorders and 81.25% in the group with mood disorders. The odds of patients with severe bullying was 1.602 times higher for males than for females. Independently by the gender, the odds of patients being in the group with severe bullying were more than three times higher for subjects with mood disorders than for patients suffering from anxiety and adjustment disorders.

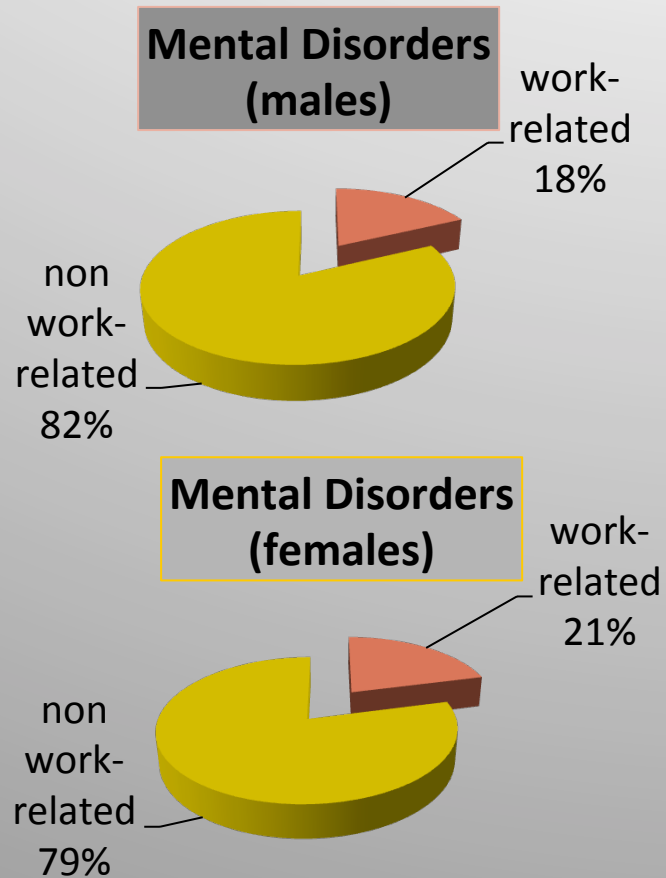
Discussion In the male gender, the psychiatric disturbances are more correlated to bullying at the workplace and this datum is especially linked to the gender differences found in the relationship between severity of bullying and adjustment disorders. Among female employees the psychopathological dimensions could be linked with a more multifactorial genesis in relation to their psychosocial role in the cultural context we examined (Southern Italy).

Keywords Bullying at workplace · Psychiatric disturbances · Working psychopathology · Life stressors · Gender

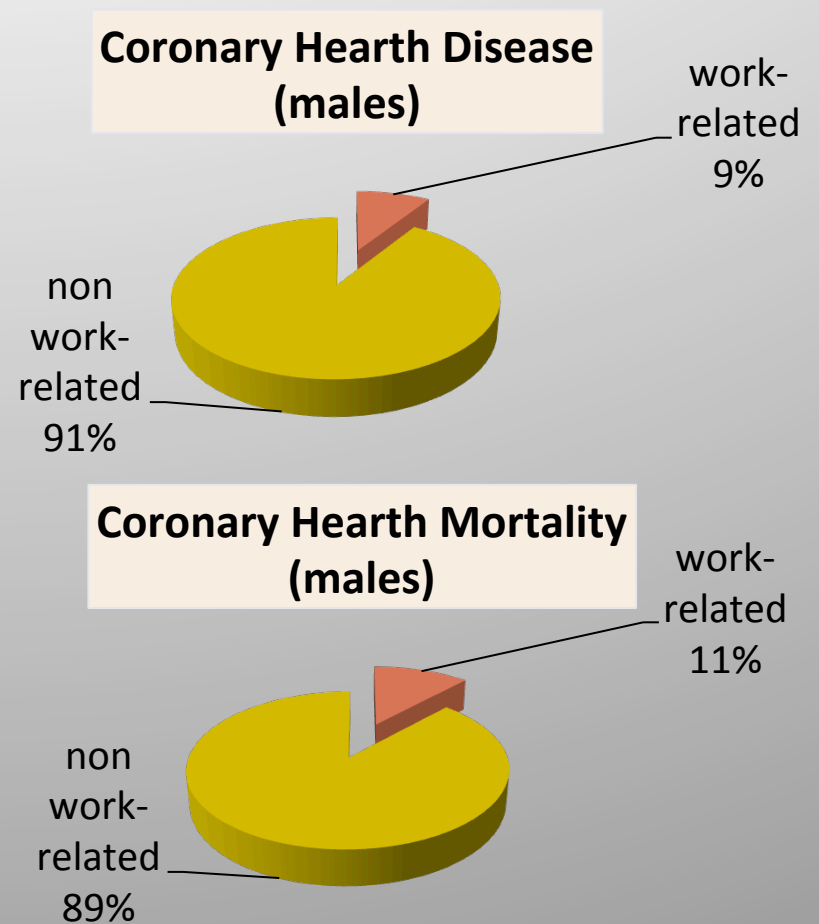
Introduction

The attention concerning the relationships between the psychosocial stress at work and the onset of mental and psychosomatic disorders is now emerging. These relationships regard three main areas: (a) the work organizational characteristics; (b) the job insecurity and disadvantaged socio-economic position; (c) the phenomenon of interpersonal conflicts and mistreatment (mobbing, bullying at work).

% work-related MD in France



% work-related CHD in France



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E DISADATTAMENTO LAVORATIVO
(Responsabile: dr. Giovanni Nolfe)

Proiezione WHO sulle cause di disabilità nel 2020

Cardiopatie ischemiche	82.3
Depressione unipolare	78.7
Incidenti della strada	71,2
Malattie cerebrovascolari	61.4
Pneumopatie ostruttive	57.6
Infezioni respiratorie	42.7
Tubercolosi	42.5
Danni fisici delle guerre	41.3
Malattie intestinali	37.1
HIV	36.3

(da Murray e Lopez, Lancet, 1997)

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E DISADATTAMENTO LAVORATIVO
(Responsabile : dr. Giovanni Nolfe)

European Pact for Mental Health and Well-Being (2008) that calls for action to be taken in five domains:

- Mental health in youth and education.
- Mental health of older people.
- **Mental health in the workplace.**
- Prevention of depression and suicide.
- Addressing stigma and social exclusion.

The importance of mental health in the workplace is recognised in this as well as other EU initiatives such as the:

- Lisbon Strategy on Growth and Jobs (2005)
- Community Strategy on Health and Safety at Work (2007 to 2012)
- Together for Health: A strategic approach for the EU(2008 to 2013).

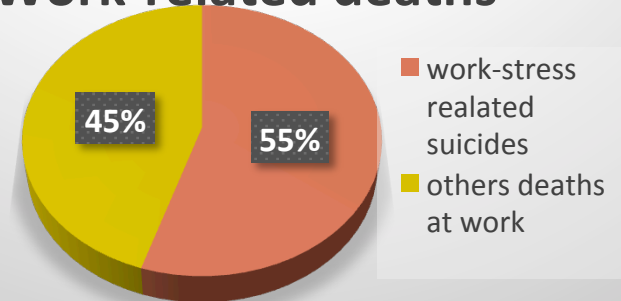
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STRUTTURA CENTRALE SULLA PSICOPATOLOGIA DA MOBING E DISADATTAMENTO LAVORATIVO

(Coordinatore: dr. Giovanni Nolfe)

International Journal of Injury Control and Safety Promotion
Vol. 19, No. 2, June 2012, 131-134

Work-related deaths



Work-related suicide in Victoria, Australia: a broad perspective

Virginia Hazel Routley* and Joan E. Ozanne-Smith

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(Received 6 May 2011; final version received 21 October 2011)

While unintentional work-related injury is increasingly recognised as important and preventable, population studies of the full range of work related suicides have received less attention. The objective of this study is to investigate the epidemiology of work-related suicide in Victoria, July 2000–December 2007. The study draws on a database of all work-related deaths reported to the Victorian Coroner, inclusive of broadly defined work-relatedness. Inclusion criteria for work-related suicide were at least one of: suicide means was work related, work stressors were identified in police reports to the Coroners or the Coroner's finding, the suicide method involved another person's work (e.g. rail suicide, heavy vehicle) or the suicide location was a workplace. Cases still open for investigation were excluded. Of 642 work-related suicides, 55% had an association with work stressors; 32% jumped or lay in front of a train or heavy vehicle; 7% involved a work location and 6% involved work agents. Work stressor cases identified included business difficulties, recent or previous work injury, unemployment/redundancy or conflict with supervisors/colleagues (including workplace bullying). Work-related suicide is a substantial problem, for which few detailed population wide studies are available. Further research is required to understand the contribution of work stressors and effective interventions.

Keywords: suicide; work; occupational

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E DISADATTAMENTO LAVORATIVO
(Responsabile: dr. Giovanni Nolfe)

Scandinavian Journal of Public Health, 2007; 35: 265–271

informa
healthcare

ORIGINAL ARTICLE

The impact of psychosocial work conditions on attempted and completed suicide among western Canadian sawmill workers

ALECK OSTRY¹, STEFANIA MAGGI², JAMES TANSEY³, JAMES DUNN⁴, RUTH HERSHLER¹, LISA CHEN¹, A. M. LOUIE¹ & CLYDE HERTZMAN¹

¹The University of British Columbia, ²Thompson Rivers University, ³Oxford University, and ⁴St Michael's Hospital

Table III. Multivariate results for attempted and completed suicides after controlling for sociodemographic and non-psychosocial work condition variables.

	Completed suicide	Attempted suicide
Marital status	0.96 (0.89,1.05) (0.38)	0.99 (0.92,1.06) (0.75)
Sikh	1.29 (0.58,2.87) (0.53)	1.08 (0.53,2.23) (0.83)
Chinese	0.24 (0.03,1.93) (0.18)	0.79 (0.09,7.35) (0.84)
Tradesman	3.39 (0.73,15.83) (0.12)	
Skilled	2.42 (0.50,11.68) (0.27)	
Unskilled	3.24 (0.70,15.04) (0.13)	
Duration of employment	0.98 (0.95,1.02) (0.29)	1.00 (0.99,1.00) (0.07)
Psychological demand	0.78 (0.69,0.89) (0.00)	0.98 (0.87,1.10) (0.87)
Social support		0.73 (0.54,0.98) (0.04)

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Contents lists available at ScienceDirect

Psychiatry Research

journal homepage: www.elsevier.com/locate/psychres



Impact of employment status and work-related factors on risk of completed suicide A case-control psychological autopsy study

Barbara Schneider ^{a,*}, Kristin Grebner ^a, Axel Schnabel ^b, Harald Hampel ^a, Klaus Georgi ^a, Andreas Seidler ^c

^a Department of Psychiatry, Psychosomatic Medicine, and Psychotherapy, Goethe-University, Frankfurt/Main, Germany

^b Centre of Legal Medicine, Goethe-University of Frankfurt/Main, Germany

^c Institute of Occupational and Social Medicine, Technical University of Dresden, Germany

Disoccupazione
Ritiro precoce dal lavoro
Condizioni psicosociali di lavoro negative

ARTICLE INFO

Article history:

Received 8 February 2011

Received in revised form 19 July 2011

Accepted 26 July 2011

Available online xxxx

Keywords:

Case-control study
Psychological autopsy
Unemployment
Working conditions
Completed suicide
Outside occupation

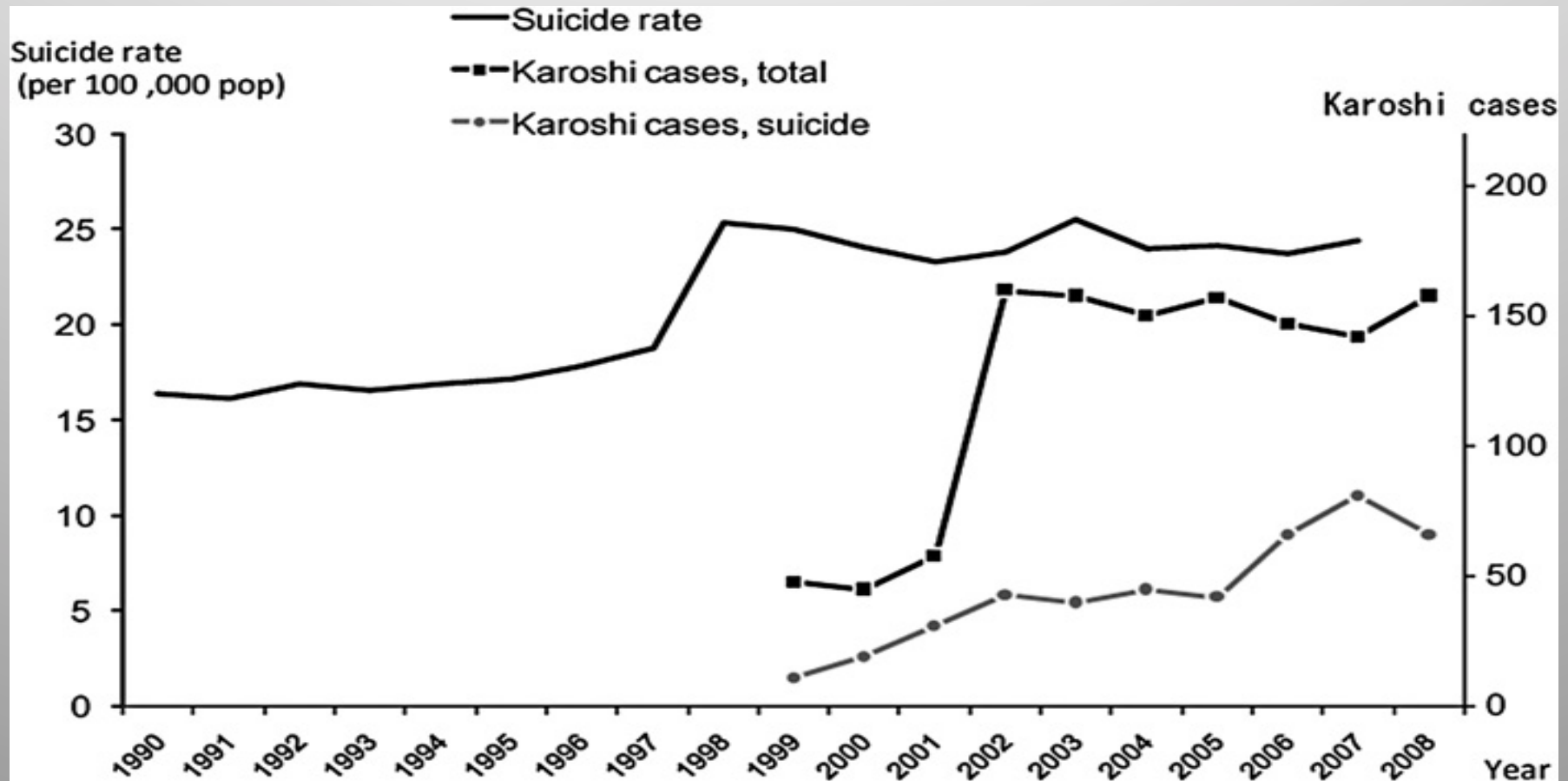
ABSTRACT

The objective of this study was to determine the impact of work-related factors on risk for completed suicide. Psychiatric disorders and socio-demographic factors including work-related factors were assessed by a semi-structured interview using the psychological autopsy method in 163 completed suicide cases and by personal interview in 396 living population-based control persons. Unemployment (in particular more than six months), (early) retirement, or homemaker status were associated with highly significantly increased suicide risk, independently of categorized psychiatric diagnosis. In addition, adverse psychosocial working conditions, such as monotonous work, increased responsibility and pronounced mental strain due to contact with work clients significantly increased suicide risk as well, again independently of categorized psychiatric diagnosis. These findings demonstrate that negative consequences of unemployment, homemaker status with no outside occupation, or (early) retirement, as well as adverse psychosocial working conditions present relevant risk factors contributing to suicidal behavior, independently of diagnosed psychiatric disorders. Employment and a positive modification of working conditions may possibly be preventive to important adverse mental health outcomes, including suicidality.

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(Responsabile: dr. Giovanni Nolfo)



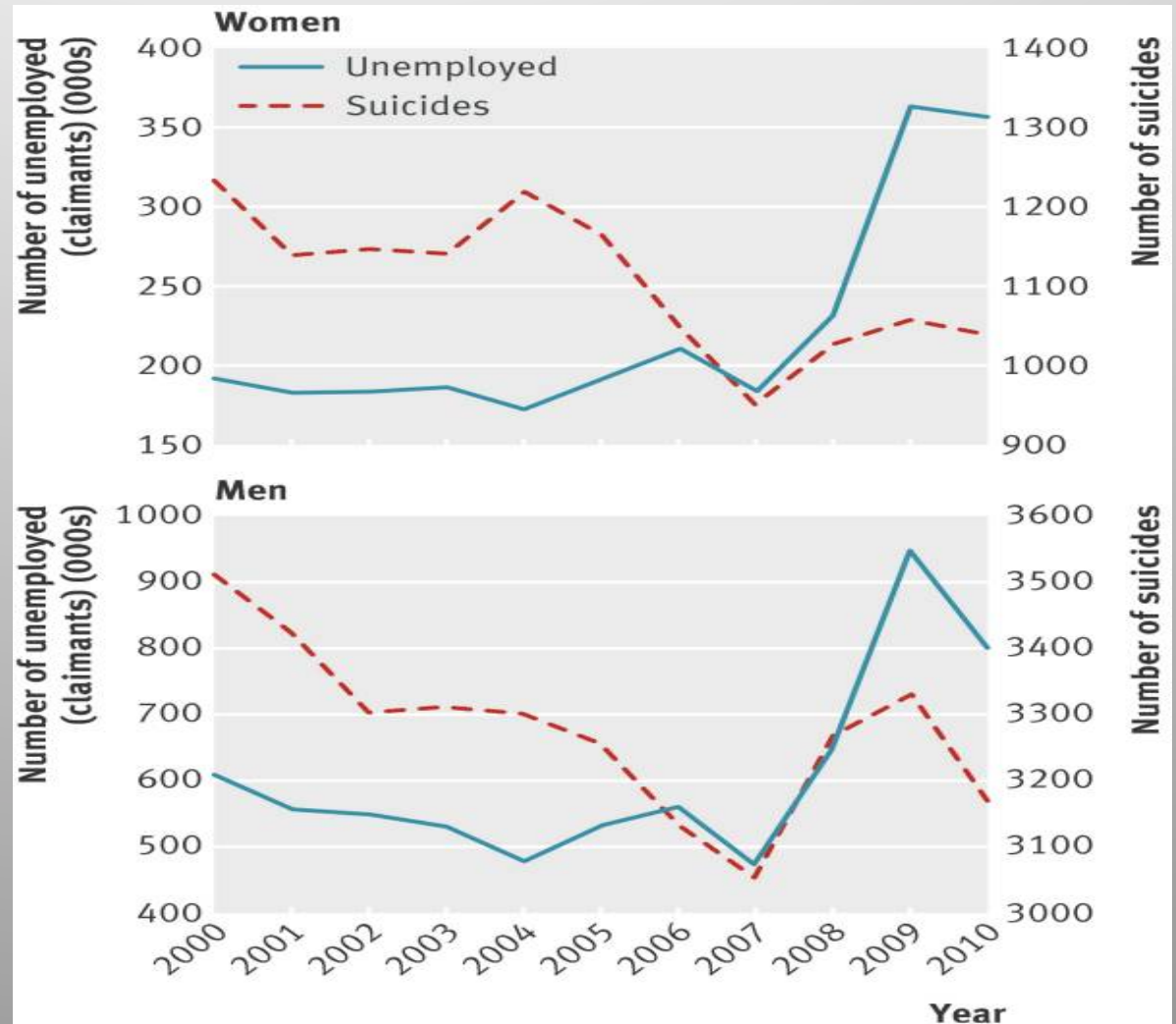
(Dati sulla popolazione giapponese; da Kondo & Ho, 2010)

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(Responsabile: dr. Giovanni Nolfe)

Suicidi e
Disoccupazione
in Inghilterra
(differenze di
genere)

(da B.Barr et al. 2012)



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E DISADATTAMENTO LAVORATIVO
(Responsabile: dr. Giovanni Nolfe)**

GENDER MEDICINE/VOL. 8, No. 4, 2011

Work Environment and Recent Suicidal Thoughts Among Male University Hospital Physicians in Sweden and Italy: The Health and Organization Among University Hospital Physicians in Europe (HOUPE) Study

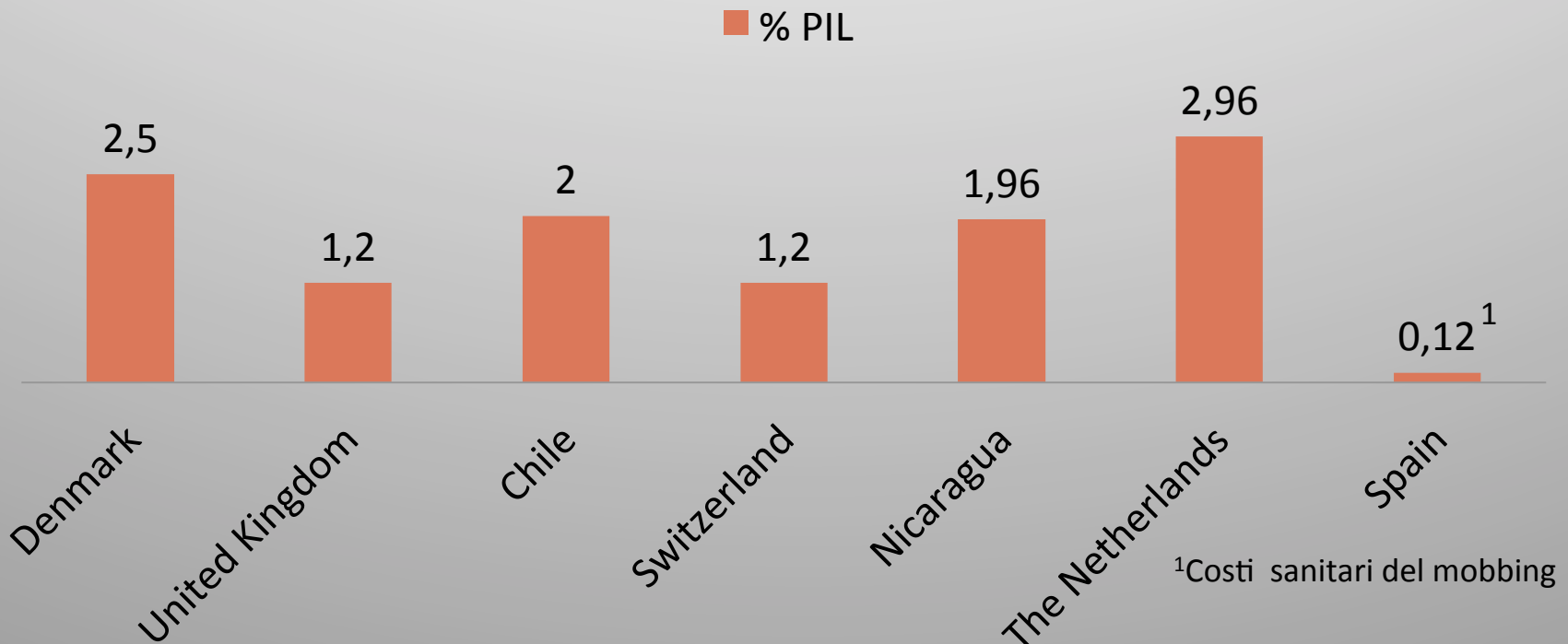
Ann Fridner, PhD^{1,2}; Karen Belkić, MD, PhD^{2,3,4}; Daria Minucci, MD, PhD⁵; Luigi Pavan, MD⁵; Massimo Marini, MS⁵; Birgit Pingel, PhD¹; Giovanni Putoto, MD, PhD⁵; Pierluigi Simonato, MD⁵; Lise T. Løvseth, PhD⁶; and Karin Schenck-Gustafsson, MD, PhD²

Table III. Work-related factors with significant ($P < 0.05$) adjusted odds ratios (ORs) for recent suicidal thoughts among male university hospital physicians participating in the Health and Organization among University Hospital Physicians in Europe (HOUPE) study.

Group	Independent Variable	Adjusted OR	95% CI
Swedish	Recent degrading experiences/harassment at work	2.1	1.01–4.5
	Role conflict	1.6	1.1–2.2
	Support at work when things get tough	0.7	0.5–0.96
Italian	Recent degrading experiences/harassment at work	3.3	1.3–8.0
	Can set own work hours	0.7	0.5–0.99
	Influence over amount of work assigned	0.7	0.5–0.97
	Confidential discussions at work about experiences	0.6	0.4–0.91

Multiple logistic regression with adjustment for nonsignificant covariates: age, number of children, and living with a partner.

Work-related stress and Bullying at workplace: economic cost



K.Sparks & C.L. Cooper, International Labour Organization (ILO) Geneva; 2001
European Agency for Safety and Health at Work; Luxembourg: Publications Office of
the European Union; 2014

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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile: dr. Giovanni Nolfo)

FATTORI AGENTI SUI COSTI ECONOMICO-SOCIALI

- Sickness absence
- Premature retirement
- Replacement costs in connection with labour turnover (recruitment, training and development costs)
- Grievance and litigation/compensation costs
- Damage to equipment and production resulting from accidents and mistakes
- Reduced performance/productivity (lack of added value to product and service)
- Loss of public goodwill and reputation

(H.Hoel, K.Sparks & C.L. Cooper, International Labour Organization (ILO) Geneva; 2001)

- Costi sanitari
- Illegalità e corruzione

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(Responsabile : dr. Giovanni Nolfe)



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Social Science & Medicine

journal homepage: www.elsevier.com/locate/socscimed



Worker health is good for the economy: Union density and psychosocial safety climate as determinants of country differences in worker health and productivity in 31 European countries



Maureen F. Dollard*, Daniel Y. Nesar

Centre for Applied Psychological Research, School of Psychology, Social Work and Social Policy, University of South Australia, Magill Campus, Adelaide, Australia

This is the first study to propose and find a direct link between worker health and life expectancy and also GDP. Supporting the significance of worker health for national health we found that worker health accounted for 13 per cent of the variance in life expectancy at a national level. In accord with work stress theory, a central finding of our study, is that national levels of worker health are positively related to national levels of GDP, and account for 13 per cent of its variance. A further innovation of our research was to identify specific work-related factors as potential determinants of

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CENTRO DI RIFERIMENTO REGIONE CAMPANIA

(Responsabile : dr. Giovanni Nolfè)

I risultati dei programmi di intervento a sostegno e per la prevenzione dei disturbi psichiatrici (principalmente depressivi) negli ambienti di lavoro nella Comunità Europea hanno determinato, sul piano economico, un risultato pari ad un risparmio, per ogni euro investito, di una cifra compresa tra 0.81 e 13.62 euro

MATRIX, Economic analysis of workplace mental health promotion and mental disorder prevention programmes and of their potential contribution to EU health, social and economic policy objectives.
(Executive Agency for Health and Consumers; Health Programme of the EUROPEAN UNION)